

STAR Property Management, LLC
3120 St. Paul Street, Terrace STE
Baltimore, MD 21218
Phone: 410-235-7764
Fax: 410-235-5055

RENTAL APPLICATION
Equal Housing Opportunity

The undersigned hereby makes an application to rent unit # _____ located at:
_____ Baltimore, MD _____.

A non-refundable processing fee of \$40.00 per person (cash or money order only), is due in order to process this application.

Anticipated lease start date of _____ at a monthly rent of \$ _____
and security deposit of \$ _____.

PLEASE TELL US ABOUT YOURSELF

Full Name _____ Home Phone () _____
Cell Phone () _____ Work Phone () _____
Date of Birth _____ Social Security # _____
Email Address: _____
Other Phone () _____
Co-Applicant Name _____
Co-Applicant Date of Birth _____ Social Security # _____
Name of Dependents _____ Date Of Birth: _____
Name of Dependents _____ Date Of Birth: _____

Are you currently on active duty in the Military? Yes _____ No _____

List All Pets _____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

Current Address _____ Apt# _____
City _____ State _____ Zip _____
Month/Year Moved In _____
Reasons for Leaving _____
Rent \$ _____
Owner/Agent _____
Phone () _____
Previous Address #1 (last 3 Years) _____
Owner/Agent _____
Phone () _____
Previous Address #2 (last 3 Years) _____
Owner/Agent _____
Phone () _____

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____
Have you ever been evicted from a rental residence? Yes _____ No _____
Have you had two or more late rental payments in the past year? Yes _____ No _____
Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Your Status: Full Time Part Time Student Unemployed _____
Employer _____
Employer Address _____
Dates Started _____
Supervisor Name _____
Phone () _____
Salary \$ _____ per _____.
(If employed by above less than 12 months, give name & phone of previous employer or school:
_____)

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____
Source/Contact Name _____

PLEASE LIST YOUR REFERENCES

Banking Accounts:

Name _____ Type of Account _____
Name _____ Type of Account _____

Personal Reference or Emergency Contact:

Name _____
Address _____
Phone _____ Relationship _____

Driver's License:

Your Driver's License Number _____ State _____

Vehicle Information:

Make / Model _____ Year _____
License Plate# _____ State _____

ADDITIONAL INFORMATION:

Please give any additional information that might help owner/management evaluate this application?

Where may we reach you to discuss this application?

Day Phone # () _____

Night Phone # () _____

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application. I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

The above information, to the best of my knowledge, is true and correct.

Please sign: X _____

Name of Applicant

Date

**AUTHORIZATION
Release of Information**

I agree to permit an investigation of my credit, tenant history, banking and employment for the purposes of renting an apartment with this owner/manager.

Name (please print)

X _____
Signature

Date

APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)

Deposit of \$ _____ Received by _____

Date _____

OFFICE NOTES: