

MOMI

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APPLICATION FOR APARTMENT – (circle property)

<u>Elevation 314</u> 314 Carroll St, NW WDC 20012 utilities included: Gas (cooking) / Water	<u>The Sheldon</u> 1443 T St, NW WDC 20009 utilities included: Heat / Water / Hot Water.	<u>Elm Gardens</u> 7050 Eastern Ave, NW WDC 20012 utilities included: Gas (cooking) / Heat / Water
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The undersigned applicant(s) hereby make(s) application to rent the premises know as UNIT # _____, for use as a residential dwelling only, under a lease for 12 months, beginning on _____, 20 __, and ending on _____, 20 __, for a total annual rent of (unit type rent x 12 months) \$ _____, payable in monthly installments of (unit type rent) \$ _____, in advance on the first of each month. Each adult to appear on lease must fill out a SEPARATE application.

ADULT NAMES TO APPEAR ON LEASE:

<u>Last Name</u>	<u>First</u>	<u>Initial</u>	<u>Social Security No.</u>	<u>Date of Birth</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

The premises are to be occupied only by the following ____ persons.

Application includes parking for an additional \$ ____ per month in rent. (circle one: Elm / 314 garage / 314 outside)

DRIVER'S LICENSE IDENTIFICATION IS REQUIRED FROM EACH ADULT APPLICANT. PLEASE PRESENT YOUR LICENSE FOR VERIFICATION. LICENSE NO.: _____

Present Address: Street: _____

City / State _____ zip _____

Present Contact Phone (____) _____ Present E-Mail Address _____

Lived there how long? _____ Occupancy from _____ to _____

Rented? _____ Owned Home? _____ Monthly Payment? \$ _____

Name & Phone of Landlord or Mortgage Co. _____ Why moving? _____

Previous Address: Street: _____

City / State _____ zip _____

Lived there how long? _____ Occupancy from _____ to _____

Rented? _____ Owned Home? _____ Monthly Payment? \$ _____

Name & Phone of Landlord or Mortgage Co. _____ Why moving? _____

PET APPLICATION (The Sheldon + Elevation 314 only; not applicable at Elm Gardens):

I agree that no pets or animals of any kind may be kept in or about the premises unless the owner consents in the Lease. (Note: Pets require additional security deposits, behavior of pet is severely restricted in the Lease and misbehavior can result in termination of Lease. Owner reserves the right to reject aggressive dog breeds. Under no circumstances will exotic pets or snakes be allowed).

Type of animal (dog or cat only) _____ Breed _____ Size (lbs) _____ Demeanor _____ Age _____

EMPLOYMENT:

MILITARY PERSONNEL: Attach a copy of current transfer orders. / IF SELF-EMPLOYED: Attach a copy of most recent U.S. Tax Form 1040, Page 1 and Schedule C.

Current Employer _____ Supervisor's Name & Phone _____ How Long? _____

Business Address & Phone _____ Business Phone _____

Position _____ Salary \$ _____ per _____

Previous Employer _____ Supervisor's Name & Phone _____ How Long? _____

Business Address & Phone _____ Business Phone _____

Position _____ Salary \$ _____ per _____

IF EMPLOYER REFUSES TO VERIFY APPLICANT'S EMPLOYMENT INFORMATION BY PHONE, IT SHALL BECOME THE RESPONSIBILITY OF APPLICANT TO PROVIDE IMMEDIATE WRITTEN CONFIRMATION FROM SUCH EMPLOYER OF SUCH INFORMATION.

Additional Income:

Amount \$ _____ per _____ If child support or alimony, who can verify? _____

A. CREDIT REFERENCES

Savings Account Number: _____ Bank: _____ City: _____

Checking Account Number: _____ Bank: _____ City: _____

Name and address of nearest relative?

Name: _____ Relation: _____

Address: Street: _____

City / State _____ zip _____

Phone (____) _____

Declared Bankruptcy? _____ Yes _____ No.

Have you ever had any judgements rendered against you (including by Landlord and Tenant Court)?

_____ Yes _____ No. If Yes, explain on separate sheet.

D. CONTINGENCIES: The following contingency(ies) shall be satisfied by : _____ Owner / _____ Agent / _____ Applicant(s) on or before _____, 20____:

E. ADDITIONAL PROVISIONS: The following additional provisions are a part of this Application:

F. AGREEMENTS OF APPLICANT:

1. **Application Fee.** I agree to pay when I submit this Application an application fee of \$25.00 for each adult applicant, including spouse. I AGREE THAT THIS APPLICATION FEE SHALL BE NON-REFUNDABLE, REGARDLESS OF WHETHER THIS APPLICATION IS APPROVED OR REJECTED.

2. **Lease and Security Deposit.** I agree that, when I sign the Lease, I will pay the first month's rent in the amount of \$_____ and I will deposit with owner / owner's agent A SECURITY DEPOSIT in the amount of one month's unit type rent. I AGREE THAT, AFTER I SIGN THE LEASE, IF I FAIL TO OCCUPY THE PREMISES FOR ANY REASON, WHEN THEY ARE MADE AVAILABLE TO ME OR IF I NOTIFY THE OWNER OR OWNER'S AGENT THAT I WISH TO CANCEL THE LEASE, THEN (1) THE FIRST MONTH'S RENT SHALL BE APPLIED TO THE LOSS OF RENT, IF ANY, INCURRED BY THE OWNER OR OWNER'S AGENT FOR THE PREMISES, WITHOUT LIMITING THE RIGHTS OF THE OWNER OR OWNER'S AGENT UNDER THE LEASE OR THEIR RIGHTS TO CLAIM FURTHER DAMAGES AGAINST ME, AND (2) THE SECURITY DEPOSIT SHALL BE APPLIED AS PROVIDED IN THE LEASE.

4. **Credit Report Fee and Credit Investigation.** I/We hereby authorize the owner or owner's agent to whom this Application is made and any credit bureau or other investigative agency used by such owner or owner's agent to investigate and to report and to disclose to the owner and the owner's agent the results of the references here enlisted, statements and other data obtained from me or from any other person pertaining to my credit, employment, rent history and financial responsibility.

5. **Applicant's Certification.** I CERTIFY THAT I HAVE READ THIS ENTIRE APPLICATION, THAT THE INFORMATION SET FORTH IN THIS APPLICATION IS TRUE AND CORRECT, AND THAT I HAVE NOT WITHHELD ANY INFORMATION WHICH IF DISCLOSED WOULD AFFECT THIS APPLICATION UNFAVORABLY. THIS APPLICATION AND THE CONTENTS HERE OF ARE PART OF MY LEASE. THE TRUTH OF THE INFORMATION CONTAINED HEREIN IS ESSENTIAL, AND IF THE OWNER OR OWNERS AGENT DETERMINES ANY ANSWER OR STATEMENT HEREIN TO BE FALSE OR MISLEADING, I AGREE THAT ANY LEASE GRANTED BY VIRTUE OF THIS APPLICATION MAY BE CANCELLED BY THE OWNER OR OWNER'S AGENT AT ANY TIME.

Applicant's Signature: _____ Date: _____

Received By: _____ Owner _____ /Owner's Agent _____

<u>The Sheldon</u> 1443 T St, NW Washington, DC 20009	<u>Elm Gardens</u> 7050 Eastern Ave, NW Washington, DC 20012
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NOTICE OF VOLUNTARY AGREEMENT

The undersigned hereby acknowledge that, prior to execution of the lease agreement for the premises known as Apartment _____ located at the property circled above:

The Housing Provider has advised and hereby advises the undersigned that, pursuant to Section 215 (Voluntary Agreements) of the District of Columbia Rental Housing Act of 1985, the Housing Provider has been granted a Voluntary Agreement which provides Maximum Legal Rent for the Apartment as follows:

Voluntary Agreement Number

Maximum Legal Rent for the Apartment

If the actual rent charged under the a Lease is less than the Maximum Legal Rent for the Apartment shown above, the Maximum Legal Rent for the Apartment shown above remains in effect and Housing Provider may use it to increase the rent charged for the Apartment as provided in the Lease or applicable law.

<u>Elevation 314</u> 314 Carroll St, NW Washington, DC 20012

NOTICE OF EXEMPTION FROM RENT CONTROL

The undersigned hereby acknowledge that, prior to execution of the lease agreement for the premises known as Apartment _____ located at 314 Carroll Street, N.W., Washington, D.C.:

THE HOUSING PROVIDER HAS ADVISED AND HEREBY ADVISES THE UNDERSIGNED THAT, PURSUANT TO SECTION 205(a)(2) OF THE DISTRICT OF COLUMBIA RENTAL HOUSING ACT OF 1985, RENT INCREASES FOR THE APARTMENT ARE NOT REGULATED BY THE RENT STABILIZATION PROGRAM (I.E., RENT CONTROL PROGRAM) OF THAT ACT, AND THAT THE APARTMENT IS EXEMPT FROM THE RENT STABILIZATION PROGRAM.

Applicant's Signature: _____ Date: _____

(ALL APPLICANTS MUST SIGN THIS FORM)