

Apt. # _____	Move-in Date _____
Lease Dates: From _____	To _____
Monthly Rent: \$ _____	Monthly Fees: \$ _____
Specials: _____	\$ _____
Leasing Consultant _____	\$ _____

Community Name _____

<p>APPLICANT #1 _____ Resident/Leaseholder _____ Co-signer/Guarantor</p> <p>Social Security # _____ Date of Birth _____</p> <p>Name _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone # Home _____ Work _____</p> <p>Email _____</p> <p>Previous Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Employed by _____</p> <p>Position/Title _____</p> <p>Salary \$ _____ /monthly or \$ _____ /yearly</p> <p>Supervisor Name _____</p> <p>Supervisor Phone _____</p> <p>Other Income: (Amount) _____</p> <p>EMERGENCY CONTACT INFORMATION (Resident/Leaseholders only)</p> <p>Name _____ Relationship _____</p> <p>Phone # (Day) _____ (Evening) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p>
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<p>APPLICANT #2 _____ Resident/Leaseholder _____ Co-signer/Guarantor</p> <p>Social Security # _____ Date of Birth _____</p> <p>Name _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone # Home _____ Work _____</p> <p>Email _____</p> <p>Previous Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Employed by _____</p> <p>Position/Title _____</p> <p>Salary \$ _____ /monthly or \$ _____ /yearly</p> <p>Supervisor Name _____</p> <p>Supervisor Phone _____</p> <p>Other Income: (Amount) _____</p> <p>EMERGENCY CONTACT INFORMATION (Resident/Leaseholders only)</p> <p>Name _____ Relationship _____</p> <p>Phone # (Day) _____ (Evening) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p>
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List all other occupants including children. (All occupants aged 18 years or older must be listed as a Resident/Leaseholder and must sign the application.)

_____	Date of Birth _____	_____	Date of Birth _____
_____	Date of Birth _____	_____	Date of Birth _____

PET INFORMATION: Do you have a pet? Yes No (Pets accepted only with the consent of this property.)

Pet Type _____	Breed _____	Weight _____	Name _____	Color _____
Pet Type _____	Breed _____	Weight _____	Name _____	Color _____

I hereby remit \$ _____ as my promise to execute a lease to be distributed as follows. In consideration of this, Home Properties agrees to reserve _____ until _____.

UNIT # _____ DATE _____

Non-refundable Fees Due Now	Deposits Due Now
\$ _____ for _____	\$ _____ for _____
\$ _____ for _____	\$ _____ for _____
\$ _____ for _____	\$ _____ for _____

Total Fees Due Now \$ _____ Total Deposits Due Now \$ _____

In the event I choose not to enter into the lease agreement, I shall waive all rights and forfeit \$ _____.

If this application is declined, \$ _____ will be retained by Home Properties for administrative costs.

If this application is accepted, I shall pay the following standard refundable security deposits and non-refundable fees and enter into a lease agreement prior to the established move-in date.

Non-refundable Fees Due by _____ DATE	Deposits Due by _____ DATE
\$ _____ for _____	\$ _____ for _____
\$ _____ for _____	\$ _____ for _____
\$ _____ for _____	\$ _____ for _____

Total Fees Due by _____ DATE \$ _____ Total Deposits Due by _____ DATE \$ _____

In addition, I agree to pay any required additional security deposit and required additional non-refundable fees in order to meet the conditions of approval if this application is approved with conditions.

I consent to allow Home Properties, through its agent and employees, to obtain and verify my credit information, criminal history, investigative consumer report, consumer report, employment, income, and landlord references, for any purpose, including determining whether or not to lease me an apartment. I understand that should I lease an apartment, Home Properties shall have a continuing right to review these items, in addition to my residency application, payment history and occupancy history for account review purposes and for improving application methods. Home Properties may obtain information from any source and may exchange credit information with consumer reporting agencies. I also affirm that all information in this application is true and complete. I make this representation knowing that if any such information proves false, Home Properties may cancel and annul any lease given in reliance upon such information.

I have read and understand the terms and conditions as stated herein. I have also been advised that I have certain rights under the Annotated Code of Maryland as outlined in Section 8-213 of the Real Property Article as follows: "(b) (1) (i) If a landlord requires from a prospective tenant any fees other than a security deposit as defined by Section 8-203 (a) of the Real Property Article of Annotated Code of Maryland, and these fees exceed \$25, then the landlord shall return the fees, subject to the exceptions below, or be liable for twice the amount of the fees in damages. (ii) The return shall be made not later than 15 days following the date of occupancy or the written communication, by either party to the other, of a decision that no tenancy shall occur. (2) The landlord may retain only that portion of the fees actually expended for a credit check or other expenses arising out of the application, and shall return that portion of the fees not actually expended on behalf of the tenant making application."

Signature _____ Date _____

Signature _____ Date _____

<input type="checkbox"/> Approved	<input type="checkbox"/> Declined (See SafeRent.)
\$ _____ total required Deposits(s)	Initials _____ Date _____
\$ _____ total required Non-refundable Fee(s)	(Attach all verifications and SafeRent decisions.)
<input type="checkbox"/> Approved with Conditions (check condition that applies below):	
a.) <input type="checkbox"/> \$ _____ total required standard Deposit(s) plus	
\$ _____ total required Additional Security Deposit	
and \$ _____ total required Non-refundable Fee(s)	
b.) <input type="checkbox"/> Approved with a Co-signer approved through SafeRent	