



Yaffe Real Estate

Owings Mills New Town
9760 Groffs Mill Drive
Owings Mills, Maryland 21117
(410) 902-1100
Fax (410) 902-1101
www.YaffeTeam.com

TENANT PACKET

TO ALL PROSPECTIVE TENANTS AND COOP AGENTS, IF YOU WISH TO APPLY FOR A RENTAL UNIT, PLEASE COMPLETE THE FOLLOWING:

1. EVERY TENANT OVER THE AGE OF 18 MUST COMPLETE ALL OF THE STEPS BELOW.
2. RENTAL CREDIT APPLICATION, COMPLETELY READ, FILL OUT, SIGN AND RETURN.
3. REAL ESTATE AGENCY DISCLOSURE AND DUAL AGENCY FORM, COMPLETELY READ, SIGN AND RETURN.
4. PAY \$45 PER ADULT IN THE FORM OF A CERTIFIED CHECK, MONEY ORDER, OR CASH PAYABLE TO YAFFE REAL ESTATE.
5. ATTACH TWO (2) PROOFS OF IDENTITY - DRIVER'S LICENSE, SS CARD OR OTHER FORM OF STATE ISSUED ID. AT LEAST ONE FORM OF ID MUST BE A PICTURE ID.
6. ATTACH PROOF OF INCOME – PAY STUBS, W2s, ETC.
7. IF APPLICABLE, ATTACH THE COOP AGENT'S CARD.
8. **THE APPLICATION WILL NOT BE PROCESSED WITHOUT THE CORRECT FUNDS AND ALL REQUIRED INFORMATION AND DOCUMENTATION.**

Thank you,

Yaffe Real Estate

1/14/11



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Rental Application: Application Information

Each adult to appear on Lease, other than husband and wife must fill out a separate application. The dwelling is to be occupied by not more than _____ persons. I understand that occupancy of the premises is limited to the following persons only. I understand that if children are occupants of the premises it is my responsibility to supply adequate supervision at all times.

ADULTS TO APPEAR ON THE LEASE

Name: _____ Birthdate: _____
SSN: _____ Drivers License #: _____
Cell Phone #: _____ Work Phone #: _____
Home Phone #: _____ Email: _____
Current Address: _____
From Date: _____ to Date: _____ Monthly Rent/Mortgage: _____
Has Intention to Vacate Been Given to Present Landlord? _____
Rent: _____ Own: _____ Why are you leaving? _____
Mortgage/Landlord Co.: _____ Phone #: _____
Move in Date: _____ Move Out Date: _____
If Selling Current Residence, Provide Real Estate Co. _____
Agent's Name: _____ Phone #: _____
Previous Address (if within 2 years): _____ Monthly Rent: _____
Owner/Agent: _____ Phone #: _____
Reason for Leaving: _____

Name: _____ Birthdate: _____
SSN: _____ Drivers License #: _____
Cell Phone #: _____ Work Phone #: _____
Home Phone #: _____ Email: _____
Current Address: _____
From Date: _____ to Date: _____ Monthly Rent/Mortgage: _____
Has Intention to Vacate Been Given to Present Landlord? _____
Rent: _____ Own: _____ Why are you leaving? _____
Mortgage/Landlord Co.: _____ Phone #: _____
Move in Date: _____ Move Out Date: _____
If Selling Current Residence, Provide Real Estate Co. _____
Agent's Name: _____ Phone #: _____
Previous Address (if within 2 years): _____ Monthly Rent: _____
Owner/Agent: _____ Phone #: _____
Reason for Leaving: _____

OTHER TENANTS

Name: _____ Date of Birth: _____ Age: _____ Relationship: _____
Name: _____ Date of Birth: _____ Age: _____ Relationship: _____
Name: _____ Date of Birth: _____ Age: _____ Relationship: _____
Name: _____ Date of Birth: _____ Age: _____ Relationship: _____
Name: _____ Date of Birth: _____ Age: _____ Relationship: _____

EMPLOYMENT HISTORY

Your Status: Full Time Part Time Student Retired Unemployed Self-Employed
 Employer Name: _____ Supervisor Name: _____
 Human Resources Phone#: _____ Fax#: _____
 Length of Employment: _____ Position: _____
 Annual Salary: _____ Overtime/Bonuses: _____

If less than one year please put previous employer below:

Employer Name: _____ Supervisor Name: _____
 Human Resources Phone#: _____ Fax#: _____
 Length of Employment: _____ Position: _____
 Annual Salary: _____ Overtime/Bonuses: _____

Spouse/Co-Applicant Information below:

Your Status: Full Time Part Time Student Retired Unemployed Self-Employed
 Employer Name: _____ Supervisor Name: _____
 Human Resources Phone#: _____ Fax#: _____
 Length of Employment: _____ Position: _____
 Annual Salary: _____ Overtime/Bonuses: _____

If less than one year please put previous employer below:

Employer Name: _____ Supervisor Name: _____
 Human Resources Phone#: _____ Fax#: _____
 Length of Employment: _____ Position: _____
 Annual Salary: _____ Overtime/Bonuses: _____

IF EMPLOYER REFUSES TO VERIFY APPLICANT'S EMPLOYMENT BY PHONE, IT SHALL BECOME THE RESPONSIBILITY OF THE APPLICANT TO PROVIDE IMMEDIATE WRITTEN CONFIRMATION OF SUCH INFORMATION. WE WILL ACCEPT THE LAST 2 PAY STUBS OR THE COMPLETED ENCLOSED EMPLOYMENT VERIFICATION FORM. IF APPLICANT IS SELF-EMPLOYED, ATTACH COPIES OF PAST TWO (2) YEAR INDIVIDUAL US TAX FORM 1040 AND SELF-EMPLOYMENT US TAX SCHEDULE C, OR SOME OTHER ACCEPTABLE FORM OF EMPLOYMENT AND/OR INCOME VERIFICATION. WE CAN FURNISH FORMS IF YOU NEED THEM.

BANK AND CREDIT INFORMATION

Assets:

Checking \$ _____
 Savings \$ _____
 Other Assets \$ _____
 Total \$ _____

Liabilities:

Auto Loan: _____	Terms: _____
Alimony: _____	Terms: _____
R.E. Mortgage: _____	Terms: _____
Child Care/Support: _____	Terms: _____
Credit Cards: _____	Terms: _____
Judgements: _____	Terms: _____
Bank Loans: _____	Terms: _____
Personal Loans: _____	Terms: _____

Have you ever:

Filed for bankruptcies or been discharged in bankruptcy in the past three (3) years? Yes No

Been sued for non-payment of rent? Yes No

Been evicted from tenancy? Yes No

Willfully or intentionally refused to pay rent when due? Yes No

Are there any judgments, law suits, or bill collection proceedings against you? Yes No

If yes, please give any additional information which might help Yaffe Team Chartered, Inc. evaluate this application:

Applicant(s) Initials: _____

SPECIAL LEASE REQUIREMENTS

LIQUID FILLED FURNITURE (WATERBEDS, ETC.) BOATS, CAMPERS/RV'S AND/OR PETS ARE NOT ALLOWED WITHOUT PRIOR WRITTEN AUTHORIZATION

PETS

TYPE(S): _____

BREED(S): _____

AGE(S): _____

WEIGHT(S): _____

NAME(S): _____

FOR THOSE PROPERTIES THAT ALLOW PETS, THE COMPANY PET POLICY IS NO MORE THAN TWO (2) WITH AN ADDITIONAL DEPOSIT FOR EACH ONE. WE ALSO ASK THAT YOU SUPPLY A PICTURE OF YOUR PET(S) WITH THIS APPLICATION.

AUTOMOBILES, MOTORCYCLES, BOATS AND TRAILERS

Year/Make/Model: _____ Tag #: _____ Color: _____

Year/Make/Model: _____ Tag #: _____ Color: _____

Year/Make/Model: _____ Tag #: _____ Color: _____

Year/Make/Model: _____ Tag #: _____ Color: _____

Are any of the above commercial vehicles? If so, which ones?

ALL MOTOR VEHICLES OR TRAILERS SHALL HAVE CURRENT LICENSES AND MAY BE PARKED ONLY IN GARAGES, DRIVEWAYS, IF PROVIDED, ON THE STREET (NOT IN FIRE LANES, OR ON LAWN), OR AS REQUIRED BY THE CONDOMINIUM OR HOMEOWNERS ASSOCIATION.

PLEASE LIST ANY OTHER ITEMS THAT REQUIRE SPECIAL EXCEPTIONS BELOW:

GENERAL INFORMATION

Citizen of (Country): _____ Passport #: _____

Diplomatic Clause Required? YES NO Length of Stay? _____

Military Transfer Clause Required? Yes No

Have you, or any prospective occupant, ever engaged in illegal drug use, manufacture or sale?

Yes No

If "yes" please explain: _____

Have you or any prospective tenant, ever been arrested or convicted for any drug-related offenses?

Yes No

If "yes" please explain: _____

Have you, or any prospective tenant, been convicted of a felony in the past seven (7) years?

Yes No

If "yes" please explain: _____

APPLICANT:

Name of nearest relative: _____ Relationship: _____

Address: _____ Phone #: _____

CO-APPLICANT:

Name of nearest relative: _____ Relationship: _____

Address: _____ Phone #: _____

LOCAL REFERENCES:

Name: _____ Relationship: _____

Address: _____ Phone #: _____

Name: _____ Relationship: _____

Address: _____ Phone #: _____

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PLEASE FEEL FREE TO ADD ANY ADDITIONAL INFORMATION AND/OR EXPLANATION WHICH WILL HELP THE LANDLORD/AGENT IN PROCESSING YOUR RENTAL APPLICATION BY ATTACHING ADDITIONAL SHEET

3RD PARTY APPROVAL – If this application or Lease is subject to the approval of any 3rd Party after the applicant(s) has been approved by Management, then the property will continue to be offered for rent until final acceptance from 3rd party. It is to be understood that the terms of the lease are not negotiable after final approval of application.

I, the UNDERSTATED APPLICANT, affirm that the information contained in this Rental Application is true and correct. I understand that misstatements, either false or incorrect, may result in rejection of this and any future Rental Application for housing managed by Yaffe Team Chartered, Inc. (YTC, Inc.) and/or my lease may be held in default and I may be subject to eviction.

I authorize the investigation and release of the information on all statements contained herein, including but not limited to a credit report, rental information, employment verification, income verification, and all public records to YTC, Inc. and/or its principal and/or the owner of any property which I am applying to occupy. I further agree to hold harmless YTC, Inc. and all providers of information on the applicant(s) listed above. I hereby waive any right of action now or hereafter accruing against any person or entity as a consequence of the release or exchange of such confidential information.

I understand that due to the Fair Credit Reporting Act, I will not be furnished with a copy of my credit report from YTC, Inc. I understand and agree that this Rental Application and any and all work product produced in evaluating this Rental Application is the sole and exclusive property of YTC, Inc.

Application fees paid to Yaffe Team Chartered, Inc. are NON-REFUNDABLE and will NOT BE REFUNDED to applicant for any reason.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____



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REQUEST FOR VERIFICATION OF EMPLOYMENT

Part 1 - Request

To: (Name & Address of Employer)

Return to: Yaffe Real Estate
9760 Groffs Mill Drive
Owings Mills, MD 21117
LYaffe@yaffeteam.com

I have applied to rent a home from Yaffe Real Estate and I stated that I am employed by you. My signature below authorizes verification of this information. Please complete and return as soon as possible.

Name of Applicant:
Address of Applicant:
Social Security #:
Signature of Applicant:
Signature and title of person making request:
Date of Request:

Part 2 - Verification

EMPLOYMENT DATA

Is applicant now employed by you? YES NO

If "no": How long has applicant been employed by you?
Date applicant left: Reason for leaving

Present Position: Probability of continued employment:
Salary Per Gross Earning/Base Salary or Wage
Overtime: Commissions Bonuses
(Last 12 months)

Additional Remarks:

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

Signature of Employer:
Title Date