



**Chesapeake Village Center, LLC
P.O. Box 144
Chester, Maryland, 21619
Rental Application**

****We are Smoke Free, Vape Free, Drug Free Campus****

Property Address: _____ Unit #: _____ City: _____ State: _____ Zip: _____

Maximum Allowed Occupancy for This Unit: _____ persons

****Occupants reside regularly. Guests are temporary. Maximum days a guest may stay: _____ days.**

Applicants must provide a copy of their current credit score & proof of income

APPLICANT #1

Full Name _____ DOB _____ Phone _____

Email _____ Driver's License # _____ State _____

Emergency Contact

Name: _____ Cell: _____ Relationship _____

Employment History

CURRENT Employer _____ Occupation _____

Address _____ Supervisor _____ Phone _____

Dates From _____ to _____ Monthly Income \$ _____

PREVIOUS Employer _____ Occupation _____

Address _____ Supervisor _____ Phone _____

Dates From _____ to _____ Monthly Income \$ _____

Other Sources of Income:

Amount \$ _____ Weekly Biweekly Monthly

Amount \$ _____ Weekly Biweekly Monthly

Residential History

CURRENT Full Address _____

Dates From _____ to _____ Owned Rented Monthly Rent _____

If Rented: Landlord _____ Phone _____

Reason for Moving _____

PREVIOUS Full Address _____

Dates From _____ to _____ Owned Rented Monthly Rent _____

If Rented: Landlord _____ Phone _____

Reason for Moving _____

Additional Occupants under 18 Years old.

1. Full Name _____ Relationship _____

2. Full Name _____ Relationship _____

Are you in the process of or have you ever been evicted? Yes/No How Many Times? _____ If/Yes When? _____

Have you ever filed for bankruptcy? Yes/No If Yes, When? _____

Have you ever been party to a lawsuit? Yes/ No If Yes, Explain: _____

Have you ever been convicted of a felony? Yes/No Explain _____

Is there anything negative on your credit or background you want to comment on? Yes/ No _____

Are you currently an active member of the military? Yes/No



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Applicant #2:

Full Name _____ DOB _____ Phone _____
 Email _____ Driver's License # _____ State _____

Applicant-2 Emergency Contact

Name: _____ Cell: _____ Relationship _____

Employment History Applicant #2

Applicant #2:

CURRENT Employer _____ Occupation _____

Address _____ Supervisor _____ Phone _____

Dates From _____ to _____ Monthly Income \$ _____

Applicant #2:

PREVIOUS Employer _____ Occupation _____

Address _____ Supervisor _____ Phone _____

Dates From _____ to _____ Monthly Income \$ _____

Other Sources of Income:

Amount \$ _____ Weekly Biweekly Monthly

Amount \$ _____ Weekly Biweekly Monthly

Residential History Applicant #2

CURRENT Full Address _____

Dates From _____ to _____ Owned Rented Monthly Rent _____

If Rented: Landlord _____ Phone _____

Reason for Moving _____

Previous Full Address _____

Dates From _____ to _____ Owned Rented Monthly Rent _____

If Rented: Landlord _____ Phone _____

Reason for Moving _____

Are you in the process of or have you ever been evicted? Yes/No How Many Times? _____ If/Yes When?

Have you ever filed for bankruptcy? Yes/No If Yes, When?

Have you ever been party to a lawsuit? Yes/ No If Yes, Explain:

Have you ever been convicted of a felony? Yes/No Explain _____

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Pets:Size/Breed Restrictions*Must Be Met Prior to Approval for Tenancy * No visiting pets allowed*

I acknowledge I **DO NOT** have a pet and no animals will be residing in the unit. **Initial Here** _____ / _____

I acknowledge I **DO HAVE AN ANIMAL(S)**. Dog # _____ Cat # _____

Pet #1: Type Dog/Cat _____ Breed _____ Name: _____ Coloring: _____

Pet #2: Type Dog/Cat _____ Breed _____ Weight _____ Name: _____ Coloring: _____

I acknowledge there is a non-refundable pet fee of \$ _____ per pet + Monthly pet fee \$ _____ per pet **Initial Here** _____ / _____

References:

Name _____ Phone: _____ Relationship _____ Years Known _____

Name _____ Phone: _____ Relationship _____ Years Known _____

General Information

Have you ever been late or delinquent on rent? Yes/No If Yes, when and who?

Agreement & Authorization

I verify that the statements in this application are true and correct. I authorize the use of the information and contacts provided to complete a credit check, reference of any nature related to this application, and/or background check. I understand that false or lack of information may result in the rejection of this application. The landlord is authorized to contact the provided emergency contacts in situations deemed necessary to address urgent matters during tenancy

Signature of Applicant 1: _____ Date: _____

Signature of Applicant 2: _____ Date: _____

Rental Application Fee: \$25 Paid? [] Yes []