



"Rent From Us Today, Buy From Us Tomorrow!"™

Quinn Property Solutions, Inc.

72 N. Leslie Road, Suite A, North East, MD 21901

T: 410.287.9662 F: 410.287-3939

www.supercleanrentals.com | info@supercleanrentals.com

RENTAL / FUTURE HOMEBUYER APPLICATION

Please Print Information Clearly and Fill Out Completely. Pets are not Permitted!

UNIT REQUESTED: _____ OCCUPANCY DATE DESIRED: _____

HOW DID YOU FIND OUT ABOUT THIS PROPERTY? _____

Applicant #1

FULL NAME: _____ SOCIAL SEC#: _____

PHONE: _____ E-MAIL: _____ BIRTHDATE: _____

REASON FOR MOVING: _____

ARE YOU CURRENTLY IN THE MILITARY? (Circle One) YES NO

HAVE YOU GIVEN NOTICE THAT YOU ARE MOVING? YES NO

EVER HAD ANY JUDGEMENTS AGAINST YOU? YES NO

HAVE YOU EVER BEEN EVICTED? YES NO

MONTHLY RENT \$ _____ IS YOUR RENT PRESENTLY CURRENT? YES NO

NUMBER OF TIMES YOUR RENT HAS EVER BEEN LATE? 0 1 2 3 4+

DO YOU HAVE A SECTION 8 VOUCHER YES NO

IF YES, HOW MANY BEDROOMS? 1 2 3 4 5+

CURRENT ADDRESS: _____ STATE: _____ ZIP CODE: _____

CURRENT LANDLORD: _____ HOW LONG? _____

CURRENT LANDLORD PHONE: _____ LANDLORD FAX: _____

EMPLOYER: _____ HOW LONG? _____ RATE OF PAY: _____

EMPLOYER ADDRESS: _____ HOURS PER WEEK: _____

SUPERVISOR: _____ SUPERVISOR PHONE: _____

ADDITIONAL INCOME (Disability, Child Support, SS, etc.): _____

Applicant #2

FULL NAME: _____ SOCIAL SEC#: _____

PHONE: _____ E-MAIL: _____ BIRTHDATE: _____

REASON FOR MOVING: _____

ARE YOU CURRENTLY IN THE MILITARY? (Circle One) YES NO

HAVE YOU GIVEN NOTICE THAT YOU ARE MOVING? YES NO

EVER HAD ANY JUDGEMENTS AGAINST YOU? YES NO

HAVE YOU EVER BEEN EVICTED? YES NO

MONTHLY RENT \$ _____ IS YOUR RENT PRESENTLY CURRENT? YES NO

NUMBER OF TIMES YOUR RENT HAS EVER BEEN LATE? 0 1 2 3 4+

DO YOU HAVE A SECTION 8 VOUCHER	YES		NO	
IF YES, HOW MANY BEDROOMS?	1	2	3	4 5+
CURRENT ADDRESS: _____	STATE: _____		ZIP CODE: _____	
CURRENT LANDLORD: _____	HOW LONG? _____			
CURRENT LANDLORD PHONE: _____	LANDLORD FAX: _____			
EMPLOYER: _____	HOW LONG? _____		RATE OF PAY: _____	
EMPLOYER ADDRESS: _____	HOURS PER WEEK: _____			
SUPERVISOR: _____	SUPERVISOR PHONE: _____			
ADDITIONAL INCOME (Disability, Child Support, SS, etc.): _____				

HOW LONG DO YOU PLAN ON LIVING IN THE NEXT RENTAL HOME THAT MEETS YOUR NEEDS? _____

WOULD YOU LIKE TO BUY A HOME IN THE NEXT 2 OR 3 YEARS? _____

WHAT IS ONE FEATURE THAT YOU LIKE ABOUT THIS PROPERTY? _____

NAME/AGE OF EACH ADDITIONAL PERSON TO RESIDE WITH YOU: _____

LIST TWO EMERGENCY CONTACTS WITH PHONE NUMBERS:

1.) _____ PHONE: _____

2.) _____ PHONE: _____

STOP! YOU WILL ALSO NEED TO ATTACH:

- COPY OF – Driver’s License or State Issued ID with Picture and Social Security Card for EVERY Applicant 18 Years and Older.
- COPY OF – Four (4) Weeks of BOTH APPLICANTS’ Most Current Pay Stubs or Other Proof of Income Listed Above.
- PAYMENT - \$25 in CASH or MONEY ORDER for an Application Fee.

An application fee is charged on all rental applicants for the purpose of verifying the information furnished on this application. This fee is nonrefundable. Applicant acknowledges this application will become part of the lease agreement, if approved. If any information is later found to be incorrect or misleading, this will be sufficient reason for immediate eviction and loss of security deposit. Once an applicant has chosen a unit an earnest money deposit of ½ of the deposit is required to hold unit. Said deposit will be refunded if application is not accepted. Upon acceptance of this application, the deposit will be retained as a portion of their deposit to hold said unit until the agreed upon move in date. At the time of signing the lease for the unit, the balance of the deposit as well as the first month’s rent are due prior to move in. These funds must be certified, money order or cash. If for some reason I do not execute said lease agreement and pay balance due all deposit monies will be forfeited. I hereby declare that the above information is correct and authorize verification of all information including but not limited to a credit check, now and in the future if necessary for the purposes of collection.

APPLICANT #1 NAME	SIGNATURE	DATE
APPLICANT #2 NAME	SIGNATURE	DATE



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PREVIOUS LANDLORD VERIFICATION FORM

Our tenant selection policy requires us to verify certain information about all members of families applying for residency with Quinn Properties, LLC. To comply with this requirement, we ask for your cooperation in authorizing your previous landlord to release information about your residency. This information will be used only in determining whether your application will be accepted for admission. Please fill in your name(s) and sign below.

APPLICANTS: _____
APPLICANT#1 NAME

APPLICANT#2 NAME

To Be Completed by Management:

Date: _____

Landlord Name: _____

Company (If Applicable): _____

Phone Number: _____

Fax Number: _____

Previous Property Rented from Landlord:

STREET CITY STATE ZIP

I hereby authorize the release of information from my previous landlord:

APPLICANT #1 NAME SIGNATURE DATE

APPLICANT #2 NAME SIGNATURE DATE