UNIVERSITY CITY
APARTMENT HOMES

Dear Prospective Resident,

Thank you for your interest in University City Apartments! We look forward to your visit here. For your convenience, we have attached an Application to Lease.

You may complete the attached Application for Lease prior to coming to the community. Each adult who will reside in the apartment is required to complete a separate application. Completing this application prior to your visit will save you time. When filling out the application, please thoroughly complete all requested information. In addition to the completed application, you will be required to provide the following documentation:

- Valid, Government Issued Photo identification
- Two most recent pay stubs, an offer letter from the employer on company letterhead identifying start dates and salary *
- A $35.00 application fee, per adult applicant in a money order.

Upon visiting the community, you will be greeted by our team, leasing consultant or property manager. You will be asked to complete a Guest Card, which will help us identify your desires for your future apartment home. Our team will be happy to assist you by reviewing our community features, and show you a representative apartment for the community.

After you have selected an apartment home and submit the required above documentation our team will work with you to finalize any additional paperwork, provide the details of your move, and review our policies and procedures as related to your move to the community.

Again, thank you for your interest in University City Apartments! We look forward to meeting you in the near future, and should you have any questions, please do not hesitate to call us at 301-434-2414.

Thank You,
The Management Team for
University City Apartments

* Note: Additional items may be accepted for proof of income. Please contact a Leasing Agent for details.

EQUAL HOUSING
OPPORTUNITY

APPLICATION FOR LEASE

APPLICANT INFORMATION:

Full Name (Last) _____ (First)_____ (MI) _____

Social Security Number: _____-_____-_____ Date of Birth: _____/_____/_____

Home Phone Number: (_____)_____-_____ Work Phone Number: (_____)_____-_____

Cell: (_____)_____-_____ Email: _____

Proof of Identification: Type _____ Identification Number _____
Official Government / State Issue ID, such as Drivers License, Passport, State Identification Card, Etc.

Additional Resident Information:

Name of Co-Applicant(s): _____ _____
(Co-Applicants must fill out individual applications)

Name of Minor Occupant: _____ Birth Date: _____

Name of Minor Occupant: _____ Birth Date: _____

Name of Minor Occupant: _____ Birth Date: _____

Total Number of Occupants to Live in the Apartment: _____

Do you have a pet? YES _____ NO _____ If yes, type of pet? _____

Would a Visual Smoke Detector be required due to a severe hearing loss? YES _____ NO _____

RESIDENCY INFORMATION: (Please provide a two year history)

Current Address: _____ Move In Date: _____
(Street) (Unit) (City, State, Zip)

Do you own or rent your current residence? OWN / RENT (circle one)

Name of Landlord or Community: _____

Landlord's Daytime Phone Number: _____

Monthly Rent Paid: _____ Was lease in your name? YES / NO (circle one)

Previous Address:_____ Move In Date: _____
(Street) (Unit) (City, State, Zip) Move Out Date: _____

Did you own or rent your previous residence? OWN / RENT (circle one)

Name of Landlord or Community: _____

Landlord's Daytime Phone Number: _____

Monthly Rent Paid: _____ Was lease in your name? YES / NO (circle one)

EMPLOYMENT INFORMATION:

Employer**:**

Name:_____ Address:_____
(Street) (City, State, Zip)

Dates of Employment: From_____/_____ to present.

Position Title: _____

Income: $_____ Weekly / Bi-Weekly / Yearly

Human Resources Telephone Number: _____

Part Time Employer (if applicable):

Name:_____ Address:_____
(Street) (City, State, Zip)

Dates of Employment: From_____/_____ to present.

Position Title: _____

Income: $_____ Weekly / Bi-Weekly / Yearly

Human Resources Telephone Number: _____

Other Income Sources: (Savings, Retirement, Verifiable Child Support, etc.)

Source: _____

Verifiable Income: $_____ Weekly / Bi-Weekly / Yearly

Bank Information:

Name of Bank: _____ Branch: _____

Checking Account #: _____ Savings Account #:_____

EQUAL HOUSING OPPORTUNITY

application continues on other side

RELATIVE OR FRIENDS TO NOTIFY IN CASE OF AN EMERGENCY

1. Full Name (Last) _____ (First)_____ (MI) _____
   Address: _____
   (Street) (Unit) (City, State, Zip)
   Home Phone Number (____)_____-_____ Work Phone Number: (____)____-_____
   Cell Phone Number: (_____)_____-_____ Email: _____

2. Full Name (Last) _____ (First)_____ (MI) _____
   Address: _____
   (Street) (Unit) (City, State, Zip)
   Home Phone Number (____)_____-_____ Work Phone Number: (____)____-_____
   Cell Phone Number: (_____)_____-_____ Email: _____

QUESTIONNAIRE (Any unanswered "yes" or "no" question shall result in cancellation of your application.)

1. Are you or is any member of your household currently involved in eviction proceedings? Yes: _____ No: _____

2. Has a Landlord issued you a Notice to Vacate due to lease violations in the past 7 years? Yes: _____ No: _____
   If yes- Date:_____ Explain: _____

3. Have you or any member of your household ever been convicted of or pled guilty or "no contest" to any felony? Yes: _____ No: _____
   If yes- Date:_____ Explain: _____

4. Have you or any member of your household ever been convicted of or pled guilty or "no contest" to a sex crime? Yes: _____ No: _____
   If yes- Date:_____ Explain: _____

5. Are you or is any member of your household listed on a registry of sexual offenders? Yes: _____ No: _____
   If yes- Explain: _____

6. Have you or any member of your household ever been convicted of or pled guilty or "no contest" to illegal distribution or manufacture of a controlled substance? Yes: _____ No: _____
   If yes- Date:_____ Explain: _____

7. Are you or is any member of your household an illegal user of a controlled substance? Yes: _____ No: _____

8. Have you or has any member of your household ever been or currently is a member of a gang? Yes: _____ No: _____

I have read the foregoing and certify that the information herein is TRUE and CORRECT and that this application is submitted for the purpose of inducing approval of this application on my behalf. Any false statement on the application may lead to the rejection of my application or immediate termination of my lease. Further, if I subsequently am involved in conduct which would result in a "yes" response to any of the questions set forth above (even after I sign the lease and take possession of the apartment home), I understand that Landlord may terminate the Lease.

I agree to lease the premises and hereby tender a non-refundable application fee. I understand that occupancy is subject to possession being delivered by present occupant. The application fee(s) per applicant have been deposited by Landlord, with the clear understanding that this application, along with each prospective occupant, is subject to approval by Landlord in its sole discretion. The applicant understands that he/she must provide the required verification documents within 48 hours of the application date or this application will be automatically cancelled by management. The applicant also understands that upon approval of this application he/she is required to sign a "Commitment to Lease" agreement and pay $300.00 "prepaid rent" by money order/certified funds within 48 hours of approval notification or the application will be automatically cancelled by management.

Authorized Verification Release

Applicant authorizes prospective landlord to verify the accuracy of all statements in this application through criminal background checks, credit reporting agencies, both present and previous employers and landlords, and other sources, as Landlord deems necessary. I release Landlord, its employees and agents, and anyone providing verification information from all liability for any damage whatsoever incurred in obtaining and furnishing such information.

Applicant Signature: _____ Date: _____

The Civil Rights Act of 1968, as amended by the Fair Housing Act Amendments of 1988, prohibits discrimination in housing based on race, color, national origin, religion, sex, handicap, or familial status. The management of this property is committed to complying with the letter and spirit of the laws which provide an equal housing opportunity to all. The federal agency which administers compliance with the fair housing laws is the United States Department of Housing and Urban Development.

EQUAL HOUSING OPPORTUNITY

UNIVERSITY CITY
APARTMENT HOMES

EMPLOYMENT VERIFICATION WORKSHEET

To:_____
Employer
Attention: Human Resources / Payroll / Personnel Department

Your employee has placed an application with University City Apartments. Your assistance in verification of the following employment information is appreciated. Once completed please fax this page back 301-439-6859.
Thank you! University City Apartments.

NOTE: DO NOT FILL OUT BELOW THIS LINE

Applicant Statement of Release-

I, _____ give permission to release the employment information below.

Signature of Applicant: _____

Employee Name: _____

Social Security Number: _____

Dates of Employment: Start_____ to _____

Position: _____

Full or Part Time (circle one) Hours per week: _____

Payment Schedule: Weekly:_____ Bi-Weekly: _____

Monthly: _____ Other: _____

Salary or Hourly Wage: _____

Verified By: _____

Title: _____

Telephone: _____

UNIVERSITY CITY
APARTMENT HOMES

RESIDENCY VERIFICATION WORKSHEET

FRIEND ____ RELATIVE____LANDLORD_____PRESENT_____PREVIOUS_____

NAME OF LANDLORD _____

NAME OF APPLICANT _____

_____

ADDRESS _____

I authorize my Landlord named above to furnish the information requested by University City Apartments. I also release UNIVERSITY CITY APARTMENTS, its LLC managers and members, officers, directors, agents, employees, heirs and assigns from any and all liability which by reason of compliance with the above request.

_____
Applicant's Signature

NOTE: DO NOT FILL OUT BELOW THIS LINE

LANDLORD: PLEASE FAX COMPLETED TO 301-439-6859

1. How long did applicant reside at above address? From _____ To _____
2. What was the monthly rent paid by applicant? $ _____
3. Was rent paid as agreed? _____
4. How many times was rent paid late but before the 15th of the month? _____
5. How many times was rent paid late, after the 15th of the month? _____
6. What is the outstanding balance, if any, on their account? _____
7. After move-out what was the condition of the apartment? _____
8. Were there any complaints relating to noise, housekeeping, over-occupancy, etc.? _____
9. Was a Management Notice issued? _____
10. Did they give proper notice? _____
11. Would you rent to this person again? _____. If no, please explain

_____

_____

Verified by: _____Title: _____Phone#: _____