

*The*  
**Washington House**



**WELCOME HOME.**

**Application Fee:** \$35 (non refundable)

**Security Deposit:** (non refundable)

- \$500 \* Studio
- \$600 \* 1 BR
- \$700 \* 2 BR

\*Price contingent upon sufficient credit record.

**Move In/Move Out:**

\$200 (non-refundable)

**Dog Lease and Registration:**

\$500 per dog (limit 2)  
(non-refundable)

**Cat Lease and Registration:**

\$300 per cat (limit 2)  
(non-refundable)

**Monthly Pet Fee:** \$20

*Please Note: Administrative Fees apply with use of credit card.*

**LEASING OFFICE CONTACTS:**

**Anthony Hooper & Christina Theoharis**

2120 16th Street, NW  
Suite 204  
Washington, DC 20009

**Phone: (202) 387-6000**

**Fax: (202) 387-4906**

**E-mail: [management@ptmanagement.com](mailto:management@ptmanagement.com)**



## **RENTAL APPLICATION**

*Please Note: All fields are required to be filled. Signature required at the bottom.*

Property Name: \_\_\_\_\_

Unit #: \_\_\_\_\_

Rent: \$ \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

**Security Deposit:**      • Efficiency - \$500      • 1 Bedroom - \$600      • 2 Bedroom - \$700

## **PERSONAL HISTORY**

Mr., Mrs., Ms.: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Sec. No.: \_\_\_\_\_ DOB: \_\_\_\_\_

**Current Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Rent: \$ \_\_\_\_\_

How Long? \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Landlord's Name/Property Management Name: \_\_\_\_\_

Landlord/Property Management Phone #: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Rent: \$ \_\_\_\_\_

Managers'/Management Name: \_\_\_\_\_

Manager's/Management Phone #: \_\_\_\_\_





**EMPLOYMENT HISTORY**

Currently Employed By: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Supervisor Phone Number: \_\_\_\_\_

Gross Pay/Monthly Income: \$ \_\_\_\_\_

How long have you been employed there? \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**FINANCE CREDIT HISTORY**

Bank Name: \_\_\_\_\_ City & State: \_\_\_\_\_

Bank Loan: \_\_\_\_\_ Date Opened: \_\_\_\_\_

Amount of Loan: \_\_\_\_\_ Mo. Pmt.: \_\_\_\_\_

Credit Card/Other: \_\_\_\_\_ Date Opened: \_\_\_\_\_

Credit: \_\_\_\_\_ Mo. Pmt.: \_\_\_\_\_

Automobile Make, Model, Color: \_\_\_\_\_

Tag No. & State: \_\_\_\_\_

Financed By: \_\_\_\_\_

**PERSONAL REFERENCES**

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_





**OCCUPANTS UNDER AGE OF 18 YEARS OLD**

Full Name: \_\_\_\_\_

Age: \_\_\_\_\_ Male/Female: \_\_\_\_\_

School Attending/ Employer: \_\_\_\_\_

Relationship: \_\_\_\_\_

**PETS**

*Separate Pet Lease must be completed and fees paid at time of lease signing as well as \$20/monthly rent surcharge due per pet. All building Rules and Regulations related to pets must be complied with or Pet Lease is subject to forfeiture.*

**Dog Lease Fee: \$500**

**Cat Lease Fee: \$300**

Pet (1) Calling Name: \_\_\_\_\_

Type of Breed: \_\_\_\_\_

Weight: \_\_\_\_\_

Color: \_\_\_\_\_

Pet (2) Calling Name: \_\_\_\_\_

Type of Breed: \_\_\_\_\_

Weight: \_\_\_\_\_

Color: \_\_\_\_\_





**APPLICANT CREDIT DISCLOSURE AUTHORIZATION**

*Application is subject to a satisfactory report by FIRST Advantage Safe Rent and the approval of the management. Applicant's signature affixed hereto shall certify all statements included in this application above are true and correct. Further, applicant's signature authorizes the release of said credit reports and other facts to the financial party in interest.*

**AUTHORIZATION TO RELEASE INFORMATION:**

*I hereby authorize all third parties indicated on my application to furnish the information requested above, to FIRST Advantage Safe Rent. I release the third parties, their officers, agents, and employees from any and all liability which may result by reason of compliance with the above information.*

**Applicant Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Applicants Signature (Required):**

\_\_\_\_\_

**Date:** \_\_\_\_\_

*\*All Application Fees are Non-Refundable*





**CO-SIGNER**

*In the event that the employment and/or income requirements are not met or adequate.*

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Home Phone#: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Monthly Rent/Mortgage: \$ \_\_\_\_\_

Present Landlord: \_\_\_\_\_

Phone # of Landlord: \_\_\_\_\_

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_

How Long: \_\_\_\_\_

Monthly Gross Salary: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Supervisor E-mail: \_\_\_\_\_

Other Source of Income: \_\_\_\_\_





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**Co-Signer Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Co-Signer Signature (Required):**

\_\_\_\_\_

**Date:** \_\_\_\_\_

