

BLUE HERON RENTALS
PO Box 64, Arnold, MD 21012

LEASE APPLICATION
410-757-4014

Requested Rental Period: ___/___/___ to ___/___/___ # ___ nights

1. APPLICANT'S NAME _____

2. DATE OF BIRTH _____

3. SS# _____ **OR** DRIVER'S LICENSE # _____

4. ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

5. PHONE (H) _____ (W) _____

CELL _____ EMAIL _____

6. EMPLOYER _____

ADDRESS _____ PHONE _____

7. TOTAL # OF OCCUPANTS: ___ (# Adults: ___ & # Children: ___)

LIST ALL NAMES: _____

8. VEHICLE(S) DESCRIPTION:

#1) Make _____ Model _____ Year _____ Color _____ State _____ Tag # _____

#2) Make _____ Model _____ Year _____ Color _____ State _____ Tag # _____

9. EMERGENCY CONTACT _____

ADDRESS _____

PHONE _____ RELATIONSHIP _____

NOTE NO PETS AND NO SMOKING IN CONDO Please initial acceptance: _____

I/We hereby affirm that my answers to the foregoing questions are true and correct, and that I have not knowingly withheld any fact or circumstances which would, if disclosed, affect my application unfavorably. I authorize you to verify any information contained in this application and release all concerned from all liability in connection with any information they give. This application is offered without respect to a race, creed, religion, physical or mental handicap, color, sex, national origin, age, occupation, personal appearance, sexual orientation, or marital status.

PLEASE READ 303 EAST WINDS EAST "HOUSE RULES" DOCUMENT BEFORE SIGNING

APPLICANT _____ DATE _____