



RENTAL APPLICATION

				Name(s) of Applicant(s) [A
separate application f	orm is to be c	ompleted when	co-applicants are not ma	arried], (the "Applicant" whether one or
more) hereby applies or	ı	, 20,	to	(the Landlord) for
rent of the following des	cribed property	ocated in the City	or County of	(the "Property") for
occupancy beginning		, 20, and e	ending on	, 20, at a monthly rental of
\$	_•			
Property address:				Date of birth:
Work Telephone:				Social Security No.:
Driver's license no. and	State of issue:_			
Other name(s) of Applic	ant used within I	ast 3 years		
Names of occupants of	the property oth	er than Applicant a	and relationship to Applicar	nt:
Number of vehicles:	Make/Model/	State license tag #	t:	
Number of pets (include	weight and bree	ed):		
CURRENT ADDRESS:				
Present address:				How long?
Reason for leaving:			Monthly rent:	Telephone:
Name and telephone of	previous Owner	or Agent:		
PREVIOUS ADDRESS:				
Previous address within	last 3 years:			
From to		Monthly rent:	Address:	
Reason for leaving:				
Name, address, and tele	ephone of Owne	r or Agent:		
From to		Monthly rent:	Address:	
Reason for leaving:				
Name, address, and tele	ephone of Owne	r or Agent:		
From to		Monthly rent:	Address:	
Reason for leaving:				
Name, address, and tele	ephone of Owne	r or Agent:		
[]	APPLICANT [] APPLICAN	NT [] LANDLORD I	HAVE READ THIS PAGE

EMPLOYMENT INFORMATION: Applicant's present employer:______Immediate supervisor:______ How long?_____ Date hired?_____Address:______ Telephone:______Employed as:______Monthly net income: \$______ If employed less than one year by present employer, previous employer:_______How long?______ Date hired?______ Immediate supervisor:_______

Telephone:	Employed as:		Monthly net income: \$
			How long?
			Telephone:
Employed as:		Monthly net inco	me: \$
Other sources of income to	be considered (Applicant	t need not disclose alimony	y, child support, or separate maintenance
income or its source, unless A	Applicant wishes to be cor	nsidered for the purpose of t	his application for lease):
Other income: \$	Source:		
Other income: \$			
Other income: \$	Source:		
Name of nearest relative (oth	er than spouse):		Relationship:
Address:			Telephone:
			Social Security No.:
			•
, taai ooo.			State of issue:
	/ork telephone:	Driver's license no. and S	
Date of birth: W			
Date of birth: W	aiden name) used within la		
Date of birth: W Other name(s) of Spouse (mass SPOUSE'S EMPLOYMENT I	aiden name) used within la	ast 3 years	
Date of birth: Work of Spouse (masses of Spouse (masses of Spouse) Spouse's EMPLOYMENT I Spouse's present employer:_	aiden name) used within la	ast 3 years	
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Date of birth: Work of Spouse (mass spouse's EMPLOYMENT I Spouse's present employer:_ Immediate supervisor: Address: Employed as:	aiden name) used within la	ast 3 years How long? Telepho	Date hired? one:
Date of birth: Work of Spouse (material spouse) of Spouse (material spouse) of Spouse (material spouse) of Spouse (material spouse) of Spouse's present employer: Immediate supervisor: Address: Employed as: If employed less than one year	aiden name) used within la	ast 3 years How long? Telepho	Date hired?
Date of birth: Work of Spouse (material spouse) of Spouse (material spouse) of Spouse (material spouse) of Spouse (material spouse) of Spouse's Employer: Address: Employed as: If employed less than one year How long? Date hired?	aiden name) used within la	ast 3 years How long? Telepho	Date hired?
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Date of birth: Wother name(s) of Spouse (mass spouse's EMPLOYMENT If Spouse's present employer: Immediate supervisor: Address: Employed as: If employed less than one year How long? Date hired? Address: Telephone: Monthly net income: \$ Other sources of income to income or its source, unless Address income or its source, unless income or its source, unless income or its source, unless income or its	ar by present employer, programmediate supervisor. Employed as: be considered (Spouse Applicant wishes to be considered)	How long? Telepho Monthly net income: \$ revious employer: sor: need not disclose alimony	Date hired?one:
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Date of birth: Wother name(s) of Spouse (masspouse's EMPLOYMENT II Spouse's present employer: Immediate supervisor: Address: Employed as: If employed less than one year How long? Date hired? Address: Telephone: Monthly net income: \$ Other sources of income to income or its source, unless A Other income: \$ Source:	aiden name) used within la INFORMATION: ar by present employer, properties Immediate supervise Employed as: be considered (Spouse Applicant wishes to be cor Source:	How long? Telepho Monthly net income: \$ revious employer: sor: need not disclose alimony nsidered for the purpose of t	Date hired?one:

APPLICANT [____] APPLICANT [____] LANDLORD HAVE READ THIS PAGE

Checking Account No. Institution: Institution: Savings Account No. Account No.____ Bank Loans/Credit Cards: Issuer: Account No._____ Bank Loans/Credit Cards: Issuer: Credit Cards: Issuer: Account No. Applicant authorizes Landlord to verify the foregoing information and to make credit, employment, rental history and reference inquiries deemed necessary by them, and Applicant also authorizes the release of information contained on this application or sought by such inquiries. If this application is accepted by Landlord, Applicant agrees to execute a rental agreement of the Property in the form which has been exhibited to Applicant by Landlord, and agrees to pay the rental for one month before occupation of the Property. The Applicant agrees that the Property Manager or Real Estate Broker representing Tenant or Landlord and all affiliated agents are not responsible for obtaining or disclosing any information contained in the South Carolina Sex Offender Registry. The Applicant agrees that no course of action may be brought against the Property Manager or Real Estate Broker representing Tenant or Landlord and all affiliated agents for failure to obtain or disclose any information contained in the South Carolina Sex Offender Registry. The Applicant agrees that the Applicant has the sole responsibility to obtain any such information. The Applicant understands that Sex Offender Registry information may be obtained from the local sheriff's department or other appropriate law enforcement officials. Signature of Applicant Signature of Applicant The undersigned acknowledges receipt from Applicant(s) on ______, 20_____, of \$_____ personal check payable to ______ as a security deposit on the Property, which shall be refunded if this application is not accepted. Applicant hereby pays \$_____ nonrefundable application fee. Signature of Recipient This Rental Application is **ACCEPTED** on ________, 20_______

CREDIT REFERENCES:

Signature of Landlord

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