CHARLESTON RENTAL PROPERTIES, LLC
RENTAL APPLICATION

Property Address:_____

TENANT INFORMATION

Name of Applicant:_____

(PLEASE REMEMBER THAT ALL ADULTS ABOVE THE AGE OF 18 YEARS OLD (UNLESS A DEPENDENT) ARE REQUIRED TO BE NAMED ON THE LEASE AND MUST FILL OUT A RENTAL APPLICATION)

Date of Birth:_____ Social Security #:_____

Cell Phone:_____ Home Phone: _____ Work Phone: _____

Email Address:_____

Do you have a pet(s) (please describe)?_____

_____

CURRENT ADDRESS INFORMATION

Current Address:_____ City:_____State:___Zip:_____

Reason for leaving:_____

Monthly Rent:_____ How Long did you live there?_____

Current Landlord Contact:_____

EMPLOYMENT INFORMATION

Present Employer:_____ Immediate Supervisor:_____

Telephone:_____ Monthly Net Income:_____

Spouse Employer:_____ Immediate Supervisor:_____

Telephone:_____ Monthly Net Income:_____

Applicant authorizes Landlord to verify the foregoing information and to make credit and reference inquiries deemed necessary by them, and Applicant also authorizes the release of information contained on this application or sought by such inquiries.

By signing this application the Applicant understands that his/her application MAY be denied if the Applicant's credit score (provided by the Property Manger's screening company) is less than 620. At the discretion of the Property Manager and/or owner of the property, the Applicant MAY be required to provide additional Security Deposit monies if the credit score does not meet the standard minimum of 620.

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 date Signature of Applicant date

The undersigned acknowledges receipt from Applicant(s) on this _____ day of _____, 20__, of $_____ by cash or personal check payable to _____ as a security deposit on the Property, which shall be refunded if this application is not accepted. Applicant hereby pays $____ as a non-refundable application fee.

_____

Recipient/Property Manager