



Properties Plus, Inc.

Property Management Division

7301 Rivers Ave Ste. 274

N. Charleston, SC 29406

843-574-9828 office

843-824-1063 fax

Rental Application

Applicant Number 1

Applicant Number 2

Full Name: _____

SSN: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Employer: _____

Address of property to be rented: _____

Move in Date : _____ Monthly rent: \$ _____ Security Deposit \$ _____

Number of Dependents: _____ Ages: _____

Pets? Y/N _____ Describe: _____

If pets are accepted, a \$200.00 pet deposit & an additional \$25.00 rent per month, per pet will apply.

How did you hear about this property? Sign _____MLS _____ Internet _____ Newspaper _____

Yellow Pages _____ Real Estate Agent (If so, whom) _____ Other _____

I understand that there is a non-refundable application fee of Twenty-Five Dollars (\$25.00) per applicant which must be paid when the application is submitted for consideration. I understand that, if any of the information that I have provided is false or misleading, my application may not be approved. I certify that the information that I have provided is true and correct, to the best of knowledge. **I hereby authorize the release of my credit report, rental history, employment history, criminal history, and any other information pertinent to my rental application.**

Signature of Release #1: _____

Date: _____

Signature of Release #2: _____

Date: _____

FAIR HOUSING POLICY PROHIBITS ANYONE FROM DISCRIMINATING AGAINST ANY PERSON BASED ON RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS, OR NATIONAL ORIGIN.

You must have a minimum of two years of verifiable rental history or mortgage payments to qualify.

1. Current Residence: _____

Dates of Occupancy: _____ Rent: _____

Reason for: leaving _____

Landlord: _____ Phone: _____

2. Prior Address: _____

Dates of Occupancy: _____ Rent: _____

Reason for leaving: _____

Landlord _____ Phone: _____

**Applicant
Number 1**

Employer: _____ **How Long:** _____

Address: _____

Occupation: _____ Supervisor: _____

Work Phone: _____ Income: _____

**Applicant
Number 2**

Employer: _____ **How Long:** _____

Address: _____

Occupation: _____ Supervisor: _____

Work Phone: _____ Income: _____

Have you or anyone living in your household ever been convicted of a crime? Yes No

If yes, explain. _____

Description of Vehicles to be parked on premises (year, make/model, license plate/state)?

Vehicle #1 _____

Vehicle #2 _____

List all persons that will be residing at this address: _____

The full security deposit must be paid once your application has been approved. After the security deposit has been received, the property will be removed from the rental market and the lease date must begin within two weeks. If an approved applicant fails to pay all monies due, sign the lease or occupy as agreed, the deposit will be forfeited.

Signature of Applicant (**COPY OF ID REQUIRED**)

Date

Signature of Applicant (**COPY OF ID REQUIRED**)

Date