

Magnolia Lane Apartments Rental Application (subject to owners approval)

MagnoliaLane@Lanecompany.com 843-234-1188

843-234-3735 fax

Name of Applicant			Maiden Name		SS#	Date	
Present Address			<input type="checkbox"/> Rent <input type="checkbox"/> Own		Home Phone	Work Phone	
Cell Phone		Email Address			Driver's License No		
City		State	Zip	Apt. No.		How Long at Present Address?	
Present Landlord/Apartment Name		City	State	Zip	Phone No.	Monthly Rent	
Former Address		City	State	Zip	How long at Former Address?	Monthly Rent	
Former Landlord/Apartment Name		City	State	Zip	Phone Number		
Current Occupation				Gross Salary		Length of Employment	
Current Employer			Complete Address			Phone Number	
Immediate Supervisor's Name and Title						Phone Number	
Past Employer (if less than 6 months at current position)			Length of Employment	Gross Salary		Phone Number	
Additional Income (describe source)							
In Case of Emergency Notify		Relation to Applicant		Complete Address		Phone number	
Personal Reference (Name)		Complete Address				Home Phone Number	
Occupation		Relation to Applicant			Work Phone Number	Years Known	
Personal Reference (Name)		Complete Address				Home Phone Number	
Occupation		Relation to Applicant			Work Phone Number	Years Known	

1.	Has any civil judgement been entered against you for the collection of a debt in the past 10 years?	Yes	No	6.	Have you ever been evicted or refused to pay rent for any reason?	Yes	No
2.	Do you have or intend to have water filled furniture in the rental unit?	Yes	No	7.	Have you, or do you intend to possess, sell, or use illicit drugs or narcotics in or about your residence?	Yes	No
3.	Do you have, or intend to have, any pets in the rental unit?	Yes	No	8.	Have you ever been convicted for possession, use or sale of illegal substances?	Yes	No
4.	Have you filed for bankruptcy in the past 10 years?	Yes	No	9.	Have you ever been convicted of a felony or misdemeanor?	Yes	No
5.	Have you ever been convicted of a sexual offense?	Yes	No				

If you answered "yes" to any of the above questions, please explain below (use reverse side if necessary):

LIST ALL OTHER OCCUPANTS WHO WILL RESIDE IN APARTMENT: (All occupants 18 and over must file separate applications)

NAME	DATE OF BIRTH	SOC.SEC #	NAME	DATE OF BIRTH	SOC.SEC #
1. _____	_____	_____	4. _____	_____	_____
2. _____	_____	_____	5. _____	_____	_____
3. _____	_____	_____	6. _____	_____	_____

ALL RENTS ARE DUE AND PAYABLE ON THE FIRST DAY OF EACH MONTH IN ADVANCE.

Pursuant to Fair Housing Laws, the management shall neither refuse to rent or lease an apartment to any person because of race, color, creed, religion, national origin, ancestry, handicaps or familial status of the applicant nor discriminate in the terms offered or the services rendered.

Management is not responsible for loss by fire, theft, smoke or water.

The undersigned warrants and represents that all statements herein are true and permits verification. Should it be determined prior to or at any time during a subsequent tenancy that information given was false, landlord reserves the right to terminate said tenancy immediately. The undersigned agrees to provide documentation necessary to substantiate present or prior earnings which are to

be considered as a basis for payment of rent. The undersigned further agrees to execute upon presentation a lease in the usual form and on terms and conditions therein stated, which lease may be terminated by the Lessor if any statement herein made is not true. This application and deposit are taken subject to previous applications.

I hereby give permission to obtain information on my credit, rental history, criminal history, income verification, and other references, now or in the future for the purpose of this application or for enforcing the provisions of any future lease with Aspen Square Management, which include, but are not limited to, the collection of rent and any other balances due.

Rental Agent _____

Prospective Tenant _____