



**RENTAL APPLICATION**

**ALL OCCUPANTS 18 YRS. AND UP MUST SUBMIT APPLICATION**  
**All applicants must attach a copy of photo I.D. and Social Security card**

**APPLICANT:** \_\_\_\_\_ **CO-APPLICANT:** \_\_\_\_\_

Last First MI

Last First MI

**ADDRESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

Street

Street

City State Zip Code

City State Zip Code

**TELEPHONE #:** \_\_\_\_\_

**TELEPHONE #:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**SOCIAL SECURITY #:** \_\_\_\_\_

**SOCIAL SECURITY #:** \_\_\_\_\_

**DRIVER'S LICENSE #:** \_\_\_\_\_

**DRIVER'S LICENSE #:** \_\_\_\_\_

**DRIVER'S LICENSE STATE:** \_\_\_\_\_

**DRIVER'S LICENSE STATE:** \_\_\_\_\_

**OCCUPATION:** \_\_\_\_\_

**OCCUPATION:** \_\_\_\_\_

**NET MONTHLY INCOME: \$** \_\_\_\_\_

**NET MONTHLY INCOME: \$** \_\_\_\_\_

**OTHER INCOME: \$** \_\_\_\_\_

**OTHER INCOME: \$** \_\_\_\_\_

**NOTE: Applicant(s) must provide documentation of income**

**LIST YOUR PREVIOUS PLACES OF RESIDENCE FOR THE PAST FIVE YEARS**

**1. ADDRESS:** \_\_\_\_\_

**1. ADDRESS:** \_\_\_\_\_

Street

Street

City State Zip Code

City State Zip Code

**APPLICANT:**

NAME OF OWNER/MGR: \_\_\_\_\_

OWNER/MGR TELEPHONE #: \_\_\_\_\_

DATES AND NUMBER OF YEARS: \_\_\_\_\_

REASON FOR MOVING: \_\_\_\_\_

**CO-APPLICANT:**

NAME OF OWNER/MGR: \_\_\_\_\_

OWNER/MGR TELEPHONE #: \_\_\_\_\_

DATES AND NUMBER OF YEARS: \_\_\_\_\_

REASON FOR MOVING: \_\_\_\_\_

**PREVIOUS RESIDENCE CONTINUED**

2. ADDRESS: \_\_\_\_\_

Street

\_\_\_\_\_  
City State Zip Code

2. ADDRESS: \_\_\_\_\_

Street

\_\_\_\_\_  
City State Zip Code

NAME OF OWNER/MGR: \_\_\_\_\_

OWNER/MGR TELEPHONE #: \_\_\_\_\_

DATES AND NUMBER OF YEARS: \_\_\_\_\_

REASON FOR MOVING: \_\_\_\_\_

NAME OF OWNER/MGR: \_\_\_\_\_

OWNER/MGR TELEPHONE #: \_\_\_\_\_

DATES AND NUMBER OF YEARS: \_\_\_\_\_

REASON FOR MOVING: \_\_\_\_\_

**EMPLOYMENT**

**EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SUPV. NAME: \_\_\_\_\_

SUPV. TELEPHONE #: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_

**PREV. EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SUPV. NAME: \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SUPV. NAME: \_\_\_\_\_

SUPV. TELEPHONE #: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_

**PREV. EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SUPV. NAME: \_\_\_\_\_

<b>APPLICANT:</b> TELEPHONE: _____  DATES EMPLOYED: _____  REASON FOR LEAVING: _____ _____	<b>CO-APPLICANT:</b> TELEPHONE: _____  DATES EMPLOYED: _____  REASON FOR LEAVING: _____ _____
<b>PREV. EMPLOYER:</b> _____  ADDRESS: _____ _____  SUPV. NAME: _____  TELEPHONE: _____  DATES EMPLOYED: _____  REASON FOR LEAVING: _____ _____	<b>PREV. EMPLOYER:</b> _____  ADDRESS: _____ _____  SUPV. NAME: _____  TELEPHONE: _____  DATES EMPLOYED: _____  REASON FOR LEAVING: _____ _____
<b>REFERENCES</b>	
<b>BANK NAME:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State                  Zip Code	<b>BANK NAME:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State                  Zip Code
<b>AUTO - LENDER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State                  Zip Code	<b>AUTO - LENDER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State                  Zip Code
MONTHLY PAYMENT: \$ _____	MONTHLY PAYMENT: \$ _____

<b>APPLICANT:</b> <b>CREDIT CARD:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code	<b>CO-APPLICANT:</b> <b>CREDIT CARD:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code
<b>OTHER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code	<b>OTHER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code
MONTHLY PAYMENT: \$ _____  <b>OTHER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code	MONTHLY PAYMENT: \$ _____  <b>OTHER:</b> _____  TELEPHONE #: _____  ADDRESS: _____ Street _____ City                  State          Zip Code
MONTHLY PAYMENT: \$ _____	MONTHLY PAYMENT: \$ _____

PROPOSED OCCUPANT NAMES	DATE OF BIRTH	RELATIONSHIP
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**PETS**

Do you have any pets? \_\_\_\_\_ If yes, how many? \_\_\_\_\_  
                                   Yes                  No

Describe what kind: \_\_\_\_\_

Inoculation records for and a picture/digital image of pet must be attached to the application.

**LIST ALL VEHICLES TO BE PARKED IN THIS COMMUNITY**

Year	Make	Model	Color	License Plate #	State
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Do you own a Trailer/RV, Boat, or Motorcycle? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, do you plan to store it elsewhere? \_\_\_\_\_

**MANUFACTURED HOME LEGAL OWNER**

\_\_\_\_\_  
Last Name First Name Telephone #

ADDRESS OF OWNER: \_\_\_\_\_  
Street City State Zip Code

**MANUFACTURED HOME INFORMATION**

YEAR: \_\_\_\_\_ MAKE: \_\_\_\_\_ SIZE: \_\_\_\_\_  
LICENSE #: \_\_\_\_\_ SERIAL #: \_\_\_\_\_ AMPERAGE: \_\_\_\_\_

Is Home Financed? YES \_\_\_\_\_ NO \_\_\_\_\_

NAME OF LENDER: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

ADDRESS OF LENDER: \_\_\_\_\_  
Street City State Zip Code

ACCOUNT #: \_\_\_\_\_ MONTHLY PAYMENT: \$ \_\_\_\_\_

RETAILER WHO SOLD YOU HOME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

ADDRESS OF RETAILER: \_\_\_\_\_  
Street City State Zip Code

**INSURANCE**

AGENT: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

INSURED BY: \_\_\_\_\_ POLICY #: \_\_\_\_\_  
Company Name

ADDRESS OF INSURANCE CO: \_\_\_\_\_  
Street City State Zip Code

**IN CASE OF EMERGENCY, NOTIFY**

NAME: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Zip Code



The South Carolina Real Estate Licensing Law, Rules and Regulations 105-21 (G), requires all real estate companies to place all funds belonging to their clients and customers in an escrow account. Further, these Rules and Regulations allow real estate companies to earn interest on these funds with interest accruing to the real estate company, provided a separate addendum or document is signed by the client or customer.

Regulation 105-21 (G) states:

“Trust funds may be placed in interest bearing accounts, in insured South Carolina Banks and Savings and Loan Institutions. Interest earned shall belong to the owner to the funds, unless otherwise agreed to in writing. Such writing shall not be included as part of the pre-printed contract form, but shall be separate document stating that the owner of the funds has been informed that interest earned on his funds shall accrue to his benefit, but that the owner of the funds nevertheless desires the interest to go to another party.”

**INTEREST ADDENDUM**

The Manager of Otranto Acres, LLC has permission to place my advance deposit or security deposit in his company’s escrow account, with interest accruing to the benefit of OTRANTO ACRES, LLC.

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Address