

# Strand Management Group

## RENTAL APPLICATION

[www.leasemyrtlebeach.com](http://www.leasemyrtlebeach.com)

590 River Oaks Drive, Myrtle Beach, South Carolina 29579—TEL: (843) 236-1353 \* FAX: (843) 236-1410

### **Applicant Number 1**

Name-Last	First	Middle (Mandatory-No Initials)
Cell Phone Number	[REDACTED]	Email Address:
Current Address (NO POST OFFICE BOXES)	City	State      Zip
Date of Birth	[REDACTED]	Social Security Number
Maiden Name or Legal Name before Name change		

**Current Residence**—Residency will be verified. False information will result in automatic denial.

Current Address	City	State	Zip
Reason for leaving	Monthly rent or mortgage payment		
How long of a lease did you sign?	Did you break your lease or were you evicted?		
Have you ever been late?	Have you ever had any returned checks?		
Have you ever been filed into evictions?	Did you give proper notice to vacate?		
Rental Company, Owner name, or Mortgage Holder—			
Contact Telephone Number—Must have when you return the application. Application will be not be processed until we have #.			

### **Employment History**

Current Employer—	How long have you been employed—
Phone Number—	
Address	City      State      Zip
Position Held	Salary or Hourly Rate      Are you still employed? <b>If not fill out next section.</b>

**Other Sources of Income**—Such as bank documents, pay stubs, or loan documents, alimony, child support

Source of Income—Attach documents	Gross or Net Amount	Name of Applicant Receiving
Source of Income—Attach documents	Gross or Net Amount	Name of Applicant Receiving

**HOW MUCH IS YOUR CURRENT MONTHLY DEBT: (Car, Insurance, Loans, Utilities, Cell Phone, Daycare=\$ \_\_\_\_\_**

### **Personal References (if more than 1 applicant please list 2 for each applicant)**

Name of Reference—CLOSE FRIEND	Relationship	Telephone Number
Name of Reference—FAMILY MEMBER	Relationship	Telephone Number

### **Emergency Contact**

Name of nearest relative not living with you	Telephone Number	Relationship
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9/14/2011

**Other Applicant Information—Find out if there is vehicle restrictions**

Vehicle Information	Make	Model	Year	Color	License Tag
Have you or anyone that will reside in the unit been convicted of a felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of a drug felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of sexual misconduct? (If so, provide offense and date of charge)					
Do you owe another rental company or private owner outstanding rental funds?					

**Applicant Number 2**

Name-Last	First	Middle (Mandatory-No Initial)
Cell Phone Number	██████████	Email Address:
Current Address (NO POST OFFICE BOXES)	City	State Zip
Date of Birth	██████████	Social Security Number
Maiden Name or Legal Name before Name change		

**Current and Past Residences—Residency will be verified. False information will result in automatic denial.**

Current Address	City	State	Zip
Reason for leaving	Monthly rent or mortgage payment		
How long of a lease did you sign?	Did you break your lease or were you evicted?		
Have you ever been late?	Have you ever had any returned checks?		
Have you ever been filed into evictions?	Did you give proper notice to vacate?		
Rental Company, Owner name, or Mortgage Holder—			
Contact Telephone Number—Must have when you return the application. Application will be not be processed until we have #.			

**Employment History**

Current Employer—	How long have you been employed—		
Phone Number—			
Address	City	State	Zip
Position Held	Salary or Hourly Rate	Are you still employed? <b>If not fill out next section.</b>	

**Other Sources of Income—Such as bank documents, pay stubs, or loan documents, alimony, child support**

Source of Income—Attach documents	Gross or Net Amount	Name of Applicant Receiving
Source of Income—Attach documents	Gross or Net Amount	Name of Applicant Receiving

**HOW MUCH IS YOUR CURRENT MONTHLY DEBT: (Car, Insurance, Loans, Utilities, Cell Phone, Daycare=\$** \_\_\_\_\_

**Personal References (if more than 1 applicant please list 2 for each applicant)**

Name of Reference—CLOSE FRIEND	Relationship	Telephone Number
Name of Reference—FAMILY MEMBER	Relationship	Telephone Number

9/14/2011

**Emergency Contact**

Name of nearest relative not living with you	Telephone Number	Relationship
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**Pets—Pet for 1<sup>st</sup> pet is \$250 and 2<sup>nd</sup> pet is \$150 (2 pet maximum)**

Breed of Pet	Type of Pet	Age of Pet	Weight of Pet
Breed of Pet	Type of Pet	Age of Pet	Weight of Pet

**Other Applicant Information—Find out if there is vehicle restrictions**

Vehicle Information	Make	Model	Year	Color	License Tag
Have you or anyone that will reside in the unit been convicted of a felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of a drug felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of sexual misconduct? (If so, provide offense and date of charge)					
Do you owe another rental company or private owner outstanding rental funds?					

I (we) hereby make an application for lease for the above described premises and deposit herewith the sums of \$50.00 per person over the age of 18 to cover the cost of a credit report. **I understand that the application fee is not refundable.** The security deposit equal to a full month rent, departure clean fee of \$105.00, and processing fee in the amount of \$50.00 is due upon approval of the application. **The security deposit is refundable if the application is not accepted.** I understand that it will take seven (7) days to have the security deposit refunded to me. I also understand that the unit will not be held for my move in until the above fees are paid in full and that if another interested party pays the above fees the unit will not be guaranteed to me. Upon acceptance of this application I (we) will have **three (3) working days** to execute and deliver the lease to Strand Management Group along with any remaining fees owed. If I (we) fail, refuse, or change our minds after the **three (3) day** designated period, the security deposit made herewith is to be retained by Strand Management Group as liquidated damages and there shall be no further liability on the part of the Owner or Strand Management Group in respect to the said proposed lease or this application. **I understand that I can not pay the security deposit, application fee, departure clean fee, processing fee or 1<sup>st</sup> month rent with a personal check. I understand that I must move into the rental unit within 14 days of the approved application or that rental unit will no longer be available to me.** The undersigned applicants hereby authorize Strand Management Group and any consumer or credit reporting agency or bureau employed by it to investigate my (our) character, general reputation, mode of living, and financial responsibility, the statements made with this application and to inquire of and check with the persons and references named therein.

I (we) warrant that all statements above set forth are true and I (we) acknowledge that any false statement shall be grounds, at Strand Management Group discretion, to terminate the lease and forfeit the deposit.

**DO NOT SIGN UNLESS YOU HAVE READ TOP PARAGRAPH!!!!**

\_\_\_\_\_  
Signature of Applicant 1

\_\_\_\_\_  
Signature Applicant 2

**FILL IN THIS INFORMATION—**

Unit Number Applying For: \_\_\_\_\_

At the Complex of: \_\_\_\_\_

Move In Date Desired: \_\_\_\_\_

Length of Lease Desired: \_\_\_\_\_

Rental Rate Quoted: \_\_\_\_\_