

Two Nine Four, LLC

PROPERTY MANAGEMENT

RENTAL APPLICATION

NO INCOMPLETE APPLICATIONS WILL BE ACCEPTED

Please email, fax, or mail completed application and fee (if applicable) to:

Two Nine Four LLC, P.O. Box 22494, Charleston, SC 29413

Phone: 843.345.7814 Email: dan@draytonrealestate.com fax 843.718.0022

\$25 application fee must be paid before application is processed

Date: _____ Apartment _____
desired _____

Applicant's Full Name: _____ Social Security _____
Date of Birth: _____ Driver's License No. and state of issue _____
Cell phone # _____
Email: _____

APPLICANT'S CURRENT ADDRESS:

Complete

Address: _____

Reason for leaving: _____ Mo. Rent/Mortgage: _____ How long there? _____

Name and telephone of Owner or Agent: _____

PREVIOUS ADDRESS: (if less than 3 years at present address)

Previous Address: _____

From _____ to _____

Reason for leaving: _____ Monthly Rent: _____

Telephone _____

Name and telephone of Owner or Agent: _____

APPLICANT'S EMPLOYMENT INFORMATION:

Applicant's present employer and address: _____

How long? _____

Immediate Supervisor and phone number: _____

Employed as: _____ Monthly Net Income: _____

If employed less than one year by present employer,

Applicant's previous employer and address: _____
How long? _____
Immediate Supervisor and phone
number: _____
Employed as: _____ Monthly Net
Income: _____

OTHER SOURCES OF INCOME

Other income \$ _____
Source: _____
Other income \$ _____
Source: _____

Name of Nearest relative(other than spouse): _____
Relationship: _____
Address: _____

Telephone: _____

Any
Pets? _____

By signing below, I give authorization for Two Nine Four, LLC to check my
credit files. _____