

HTSI PROPERTY MANAGEMENT

46 Pine Knoll Dr. Suite B-1

Greenville, SC 29609

Office #: 864-395-6538**Fax #:** 864-451-7451**Email:** property.htsi@gmail.comwww.HousesandThenSome.com

Location: _____

NOTICE TO APPLICANTS

WE DO NOT allow known Drug Dealers, Sex Offenders and Individuals Participating in Criminal Activities to Rent any of our units. If you are approved for a unit, and we as the owner, later discover that you are a narcotics user or dealer, we will immediately report you to the appropriate authorities. We will also willingly participate in testifying against you, and submit any information you give us on your application as evidence.

ONE APPLICATION PER PERSON 18 OR OLDER

ALL APPLICATION FEES ARE NON-REFUNDABLE

Date of Application _____ Email Address _____

Current Phone Number _____

Full Name (Including Middle, Sr., Jr., II, III, etc.) _____

Maiden Name (If Applicable) _____ Social Security/ITIN No. _____

Date of Birth _____ Driver's License No. _____ DL State _____

Current Address _____ City/State/Zip _____

Date Moved In _____ Rent/Mortgage Amount _____ Week Month (Check One)

Current Landlord's Name _____ Phone Number _____

Reason for Moving _____

Previous Address _____ City/State/Zip _____

From _____ To _____ Rent/Mortgage Amount _____ Week Month (Check One)

Landlord's Name _____ Phone Number _____

Reason for Moving _____

References (No Relatives)

Name _____ Relationship _____ Phone Number _____

Name _____ Relationship _____ Phone Number _____

Emergency Contacts

Name _____ Relationship _____ Phone Number _____

Current Address _____ City/State/Zip _____

Others to Occupy the Unit – Including All Children

Name _____ Date of Birth _____ Relationship _____

Name _____ Date of Birth _____ Relationship _____

Name _____ Date of Birth _____ Relationship _____

Employment

Present Employer _____ Supervisor's Name _____

Address _____ City/State/Zip _____

Phone No. _____ Employed Since _____ Salary _____ Hour Week Month Year (Check One)**A COPY OF YOUR PHOTO ID AND PROOF OF INCOME ARE REQUIRED TO COMPLETE YOUR APPLICATION**

Continue application on next page

Employment, Continued

Previous Employer _____ Supervisor's Name _____

Address _____ City/State/Zip _____

Phone No. _____ Employed Since _____ Salary _____ Hour Week Month Year (Check One)

Other Income

Source of Income _____ Amount _____ Hour Week Month Year (Check One)

Source of Income _____ Amount _____ Hour Week Month Year (Check One)

Source of Income _____ Amount _____ Hour Week Month Year (Check One)

Bills Owed (Child Support, Car Payment, Charge Cards, etc.)

Debt Type _____ Amount Owed _____ Payments _____ Week Month (Check One)

Debt Type _____ Amount Owed _____ Payments _____ Week Month (Check One)

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Vehicles How many? _____

Automobile Make & Model _____ Year _____ Color _____ License Plate Number _____ State _____

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Pets How many? _____

THERE IS A MINIMUM FEE OF \$150 PER PET, NON-REFUNDABLE

Breed(s) _____ Inside/Outside _____ Fixed _____ Declawed _____

Breed(s) _____ Inside/Outside _____ Fixed _____ Declawed _____

*Pet policies vary by residence. Please check with our office if you have any questions.

Has an Eviction ever been filed against you? Yes No Has a Landlord ever brought you to Court? Yes No

Have you ever paid your rent late? Yes No Has a Landlord ever asked you to leave? Yes No

Have you ever broken your lease agreement? Yes No Have you ever intentionally not paid rent? Yes No

Have you ever had a Judgment filed against you? Yes No Have you ever filed Bankruptcy? Yes No

Are you currently serving Probation or Parole? Yes No Have you ever been convicted of a crime? Yes No

If you answered yes to any of these questions, please provide an explanation below:



By Signing Below, You Authorize that: Credit reports may be obtained from any consumer reporting agency, verification of my rental history may be obtained from landlords, property management companies, or any other service or sources which could attest to my creditability, suitability and worthiness to rent housing accommodations. You also warrant and represent that all statements contained herein are true and correct to your knowledge and belief. If any statement or writing contained herein is not true, or you choose to withdraw this application for any reason, any holding deposit put down will be forfeited to the landlord/owner. In addition, if you are approved for a unit, you authorize the landlord/property manager/owner to report your name to the appropriate Consumer Credit Reporting Agency as the occupant of this unit, along with all history of your specific account. This application may also be released to any Consumer Credit Reporting Agency, Company, or Service upon their request.

Legal Signature _____ Date _____

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