

BRAVE REALTY, LLC.

(803) 744-9920
 (803) 744-9918 Fax

The property cannot be held for you until we
 receive a completed application
 and the required fees.

2001 Assembly St. Suite 203
 Columbia SC 29201
www.braverealty.com

RENTAL APPLICATION

Property		Type	Rent Amount
Occupancy Date	Lease Term	How Learned About Unit?	Security Deposit
Pets Allowed	Yes or No	Indoor Smoking Allowed	Yes or No
Name		Social Security No.	Date of Birth
Present Address		Telephone	How Long? _____ Rent or Own Monthly Payment _____
Reason For Moving:			
Name or Owner or Agent		Telephone	
Previous Address (complete if at current address less than 2 years)		How Long? _____ Rent or Own Monthly Payment _____	
Reason For Moving:			
Name or Owner or Agent		Telephone	
In Case of Emergency, Notify:		Telephone	Relationship
Present Employer		Telephone	From _____ To _____
Address		Position	Salary \$ _____ Per _____
Previous Employer & Telephone (complete is current job is less than 2 years)		From _____ To _____	
Address		Position	Salary \$ _____ Per _____
Name of Spouse		Social Security No.	Date of Birth
Spouses Present Employer		Telephone	From _____ To _____
Address		Position	Salary \$ _____ Per _____
Will anyone other than spouse and children listed reside with you? Yes or No If yes, please specify: _____		No. of Children	Ages of Children

Name of Bank		Address or Branch		Checking or Savings
Credit Reference	Type/Address	Monthly Payment	Acct. No./Telephone #	
Credit Reference	Type/Address	Monthly Payment	Acct. No./Telephone #	
Credit Reference	Type/Address	Monthly Payment	Acct. No./Telephone #	
Other Financial Commitments:				
Personal Reference		How Long?	Telephone	
Personal Reference		How Long?	Telephone	
Driver's License No.	His or Hers		State	
Driver's License No.	His or Hers		State	
Year, Vehicle Make, Model		Financed By Whom?		Monthly Payment
Year, Vehicle Make, Model		Financed By Whom?		Monthly Payment
Do you have any recreational vehicles, cars, boats, motorcycles? Yes or No If yes, please specify:				

*Non-married co-applicants must file separate applications.

I recognize that this application for an apartment/home is subject to acceptance or recognition.

I hereby state that the information set forth above is true and complete and authorize verification of the information and reference given. Should any statement made above be a misrepresentation or untrue, the deposit will be retained as compensation to the agent for holding the apartment/home off the market.

If the application is accepted, the lease is to be executed at the agents office within 3 days after the applicant is notified of such acceptance. At this time, deposit will be credited as part of the security deposit. If the applicant is not accepted as a resident within 5 days, the deposit will be returned, except otherwise noted.

If application is accepted and applicant does not sign the lease within the above prescribed days after notification, the deposit will be forfeited as liquidated damages in payment for holding the apartment/home off the market.

I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

Date _____, 20_____

Application must be returned to our office along with the following:

****A copy of your most current pay stub****

****Non refundable application fee of \$40.00****

****\$100 deposit (will be applied to your security deposit upon approval)
If you are not approved, the deposit will be returned to you.**

****Checks or Money Orders for application fee and deposit made payable to:****

BRAVE REALTY, LLC.

Two separate checks or money orders please.

Applicant's Signature

Brave Realty, LLC.

Applicant's Signature

IF YOU ARE APPROVED AND CANCEL, THE DEPOSIT WILL NOT BE REFUNDED.

FOR OFFICE USE ONLY

ACCEPTED

REJECTED

	By	Date
Reviewed	_____	_____
Approved	_____	_____
Reviewed	_____	_____

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I hereby authorize you to submit/verify the following information to Brave Realty, LLC.
Your prompt attention to this matter will be greatly appreciated.

(Please print entire name)

Applicant's Signature

Applicant's Signature

OFFICE USE ONLY- Do Not Fill Out

RESIDENCE VERIFICATION

LENGTH OF RESIDENCE:

From _____ To _____

AMOUNT:

\$ _____

PAID ON TIME:

NSF CHECKS:

NOISE/POLICE COMPLAINTS:

WOULD YOU RENT TO THIS INDIVIDUAL AGAIN:

ADDITIONAL COMMENTS:

Sincerely,

Trey Brave
Broker