



Aiken & Company "Since 1914"

221 Warley Street | Florence, SC 29501 | 843-665-7555

www.aikenandco.com (real estate/rental) www.aikenins.com (insurance)

Rental Application

Today's Date _____

Date Approved _____

Application Fee Paid: Yes ___ No ___

Deposit Paid: Yes ___ No ___

Rental Price: \$ _____ /month

Location Address: _____

Date of Occupancy Desired: _____

Applicant's Name: _____ Housing Authority Assisted Y___ N___

Present Address: _____ Years at Present Address: _____

Phone # _____ Email: _____

Social Security # _____ Date of Birth: _____ SCDL/ID # _____

Age: _____ Marital Status: _____

Do you have any pets? _____ If Yes, what kind: _____

Spouse/Co-Applicant Name: _____

Phone #: _____ Email : _____

Social Security #: _____ Date of Birth: _____ SCDL/ID #: _____

Present Landlord: _____ Landlord's Phone # _____

Present Rent Payment: \$ _____ Reason for moving: _____

Previous Address if at above address for less than two (2) years: _____

_____ Years there: _____ Rent Payment: _____

APPLICANT EMPLOYMENT

Employer: _____

Address: _____ Phone#: _____

of years there: _____ Your Position: _____

Supervisor: _____ Salary per Week: \$ _____

Other Income: _____

CO-APPLICANT EMPLOYMENT

Employer: _____

Address: _____ Phone#: _____

of years there: _____ Your Position: _____

Supervisor: _____ Salary per Week: \$ _____

Other Income: _____

**Names of Adults and Children who will also occupy the house:
(Birthdate & Social Security Number only needed on occupants 18 years old and above)**

_____ Birthdate: _____ Social Security # _____

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_____ Birthdate: _____ Social Security # _____

Have you ever been evicted from a rental before? Y___ N___

Filed Bankruptcy? Y___ N___

Convicted of a Felony? Y___ N___

Had any outstanding judgements against you? Y___ N___

IF Yes to any of the above, please

explain: _____

EMERGENCY CONTACT: _____ Relationship: _____

Address: _____ Phone #: _____

I hereby acknowledge that the information listed above is true and understand that any falsified information is grounds for denial. By providing this information, I also give authorization to check these references. Furthermore, I understand that a Criminal Background Check will be conducted on myself and any occupant listed 18 years old and above.

APPLICANT SIGNATURE: _____ Date: _____

CO-APPLICANT SIGNATURE: _____ Date: _____

APPLICATION FEE IS NON-REFUNDABLE

**\$35.00 FOR SOLE APPLICANT
\$70.00 FOR APPLICANT & CO-APPLICANT**

MUST BE 18 YEARS OF AGE OR OLDER TO APPLY