YOUNG MANAGEMENT, INC.

1922 Stonehenge Drive #49 Greenville, NC 27858 Website: youngmgmt.com

Phone: 252-321-8350 Fax: 252-353-8738

E-mail: rentals@youngmgmt.com

RENTAL APPLICATION

\$ 60 Non-Refundable Application Fee & Complete Online Process Youngmanagment.petscreening.com

PERSONAL INFORMATIO	N					
Full Name			Phone No. (1	Call	
Dota of Divi				/	Cell	
Date of Birth	Age	Social Security No		Email Addre	ss.	
Name of Spouse		1994		_	-	
Name of Spouse	-	Phone: —	Date of Birth:	S	ocial Security No.	
Name of Other Residents to Oc	COURSE T Lait.					
ALL APPLICANTS ARE DEC	Cupy Unit:	COMPTENT LANGUAGE				
ALL APPLICANTS ARE REC Pets: Yes No How I	Many Da	COMPLETE AN ONL	NE PROCESS A	T youngmanag	gement.Petscreening.com	m
Have voll or Spouse Ever Servi	ed in Militar	SCatsBreed and	Weight	Se	rvice Animals:	
Pets: Yes No How I Have you or Spouse Ever Serve	od ili Williai	y (Pres	ently Serve		
			oralización de la companya de la com			
RESIDENCE HISTORY					2000	
Comment A 11						
Current Address			City, State, Z	Sip		
Month & Vaca Manual I				1		
Month & Year Moved In:			Rent Amount			
Oumor of Londland				2		
Owner of Landlord:			Phone No.:_		Fax No:	
PREVIOUS ADDRESS (ISW	O 37					
PREVIOUS ADDRESS (If W Current Address	ithin 2 Years	s)				
Month & Von Moved In			City, State, Z	ip		
Owner of Landlard:			Rent Amount:			
Month & Year Moved In:Owner of Landlord:			Phone No.:		Fax No:	
					Kana at Sta	
Have you ever: Filed for Don	(conventory)	77				
Have you ever: Filed for Bank	crupicy?	YesNo Be	en Evicted from	Tenancy?	Yes No	
EMPLOYMENT INFORMA	TION.				All the second second	
Your Status: Employed EMPLOYER:	Full-Time	Employed Part-Ti	me Studer	nt Doting	J TY 1 1	
EMPLOYER:			Date:	Employed	odUnemployed	
Employer Address			Phone	Number		over a second
Position Held:		Other Income:Name & Address of Pre	Super	wisor		
Income: \$	per	Other Income:	Super	V1501		
If employed less than 1	Year, Give	Name & Address of Pre	vious Employer o	r school Inform	ation	
			. 10 40 Zinpiojei o	i school illiolli	iation	
CDOVICE HASEN CONTRACTOR						
SPOUSE EMPLOYMENT IN EMPLOYER:	<u>FORMATI</u>	ON:			Paris S. P. S. II	
			Dates	Employed:		
Employer Address			Phone	Number		
Position Held:	em one		Super	visor		
mcome. b	ner	Other Incomo				
ii employed less than i	rear, Give	Name & Address of Pre	vious Employer of	r school Inform	ation	
STUDENTS: Please fill out the Parent's Names:	following i	nformation: Full	time Part_T	ima School/II	nivranaitas	
Parent's Names:	3	run	arent's Address:	mile School/O	inversity	
			di citt 5 Madress.			
ADDITIONAL INFORMATION	DN:					
Who to Notify in Case of Emero	DIN.		8=16			
Who to Notify in Case of Emerg Relationship to Applicant: Automobile Make Do You Have a Police Record?	ency.	TY D	To	elephone:		
Automobile Make	Vac	Why are m	oving from Curren	nt Address?		
Do You Have a Police Record?	If Voc. Even	Color	Lic	ense Plate No.		
I understand that the completion	of this App	dill.				
I understand that the completion Property if the application is app	or uns Appi	ication does not insure t	hat a property will	be leased to m	e and I am under no ob	ligation to lease a
Property if the application is app tion and to run a credit check on				nt to confirm th	e information provided	on this applica-
to rail a credit check off	my record a	na run a criminal backgi	ound check.			
Signature of Applicant			200		Date:	
organiture of Applicatit		Signat	ure of Spouse			
D 6 1						
Preferred Location Application Fee: Paid Approved: YES		1 Bedroom 2	Bedroom Up	Down Pre	ferred Move-In Date	
Application Fee: Paid	_ Cash N	IO Check # Se	ecurity Deposit:	Paid	Cash MO Check #	
Approved: YES	NO	Comments:				
Approved: YES A \$75.00 NO)N-REFUN	DABLE LEASING SIG	GNING/DOC FE	EATTIMEC	F SIGNING LEASE	

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Please help us verify the rental history by filling in the blanks listed below and return via fax (252) 353-8738

Thank you in advance for your help.

I GIVE PERMISSION TO RELEASE RENTAL HISTORY INFORMATION

X						
Signa	ture					
Applicant Name:						
Address:						
For Verifying Personnel To Complete:						
*	200					
Date of Move-In	Date of Move-Out					
Amount of Rent: \$	#of Late Payments					
# of NSF's	Account Satisfactory					
Any Lease Violations (Please Explain) Bed Bug Issues, Noise etc						
Did the Tenant Have a Pet?Any Bed Bug Issues:	Security Deposit Refunded?					
Signature/Title of Person Verifying Information	Date:					
Additional Comments:						

THANK YOU