

YOUNG MANAGEMENT, INC.

RENTAL APPLICATION

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

Phone: 252-321-8350
Fax: 252-353-8738
E-mail: rentals@youngmgmt.com

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

PERSONAL INFORMATION

Full Name _____ Phone No. () _____ Cell: _____

Date of Birth _____ Age _____ Social Security No. _____ Email Address: _____

Name of Spouse _____ Phone: _____ Date of Birth: _____ Social Security No. _____

Name of Other Residents to Occupy Unit: _____

ALL APPLICANTS ARE REQUIRED TO COMPLETE AN ONLINE PROCESS AT youngmanagement.Petscreening.com

Pets: Yes ___ No ___ How Many? Dogs ___ Cats ___ Breed and Weight _____ Service Animals: _____

Have you or Spouse Ever Served in Military? _____ Presently Serve _____

RESIDENCE HISTORY

Current Address _____ City, State, Zip _____

Month & Year Moved In: _____ Rent Amount: _____

Owner of Landlord: _____ Phone No.: _____ Fax No: _____

PREVIOUS ADDRESS (If Within 2 Years)

Current Address _____ City, State, Zip _____

Month & Year Moved In: _____ Rent Amount: _____

Owner of Landlord: _____ Phone No.: _____ Fax No: _____

Have you ever: Filed for Bankruptcy? ___ Yes ___ No Been Evicted from Tenancy? ___ Yes ___ No

EMPLOYMENT INFORMATION:

Your Status: ___ Employed Full-Time ___ Employed Part-Time ___ Student ___ Retired ___ Unemployed

EMPLOYER: _____ Dates Employed: _____

Employer Address _____ Phone Number _____

Position Held: _____ Supervisor _____

Income: \$ _____ per _____ Other Income: _____

If employed less than 1 Year, Give Name & Address of Previous Employer or school Information _____

SPOUSE EMPLOYMENT INFORMATION:

EMPLOYER: _____ Dates Employed: _____

Employer Address _____ Phone Number _____

Position Held: _____ Supervisor _____

Income: \$ _____ per _____ Other Income: _____

If employed less than 1 Year, Give Name & Address of Previous Employer or school Information _____

STUDENTS: Please fill out the following information: ___ Full time ___ Part-Time School/University _____

Parent's Names: _____ Parent's Address: _____

ADDITIONAL INFORMATION:

Who to Notify in Case of Emergency: _____ Telephone: _____

Relationship to Applicant: _____ Why are moving from Current Address? _____

Automobile Make _____ Year _____ Color _____ License Plate No. _____

Do You Have a Police Record? If Yes, Explain: _____

I understand that the completion of this Application does not insure that a property will be leased to me and I am under no obligation to lease a Property if the application is approved. I hereby give my permission to the management to confirm the information provided on this application and to run a credit check on my record and run a criminal background check.

Signature of Applicant _____

Signature of Spouse _____

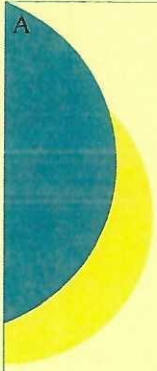
Date: _____

Preferred Location _____ 1 Bedroom 2 Bedroom Up Down Preferred Move-In Date: _____

Application Fee: Paid _____ Cash MO Check # _____ Security Deposit: Paid _____ Cash MO Check # _____

Approved: ___ YES ___ NO Comments: _____

A \$75.00 NON-REFUNDABLE LEASING SIGNING/DOC FEE AT TIME OF 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 _____
Signature

Applicant Name: _____

Address: _____

For Verifying Personnel To Complete:

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? _____

Security Deposit Refunded? _____

Any Bed Bug Issues: _____

Signature/Title of Person Verifying Information _____ Date: _____

Additional Comments: _____

THANK YOU