THE GROVES OF CLEMSON
APPLICATION FOR HOUSE RENTAL

PRINT CLEARLY!

Name: _____**Local Telephone: (_____)**_____
(FIRST) (MIDDLE) (LAST)
Current Local Address: _____

STREET ADDRESS (CITY) (STATE) (ZIP)
Permanent Address: _____

Previous Landlord: _____ **Telephone: (_____)**_____

Employer: _____-_____ **Date of Birth:** _____/_____/____

Social Security Number _____
Check One: Driver's License # Passport# State ID# Number:_____ **State:** _____
Emergency Contact: _____ **Telephone: (_____)**_____
Secondary Emergency Contact: _____ **Telephone: (_____)**_____
If you will be parking a car on the premises, please provide the following information:
Make: _____ **Model:** _____**Year:** _____ **License Plate#:** _____

PARENT OR GUARDIAN

Name: _____ **Telephone: (_____)**_____
(FIRST) (MIDDLE) (LAST)

Address: _____
(STREET ADDRESS) (CITY) (STATE) (ZIP)

Employer: _____
(NAME) (ADDRESS) (TELEPHONE)

Social Security Number: _____ **put EMAIL address BELOW PRINT CLEARLY**

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Check One: Driver's License # Passport# State ID# Number:_____ **State:** _____
Roommate Policy: To secure a house/suite one, two, three or four individuals must complete all leasing paperwork and pay all fees.
To secure a four-bedroom apartment, four individuals must complete all paperwork and pay all fees. The
GROVES of Clemson reserves the right to place roommates into the un-leased bedrooms, relocate you to another unit, or cancel your lease.
Co-ed Policy: Coed living is allowed at The GROVES of Clemson however only same gender per floor will be allowed. Subleases must be approved by all residents and guarantors of the apartments.

Deposit: Applicant has deposited herein the refundable sum of $ _____**,** the receipt of which is hereby acknowledged. **The Applicant agrees that he/she has 48 hours from execution of this application to cancel the aforementioned lease agreement and receive the refundable deposit back. After 48 hours from execution of this application, the aforementioned lease agreement cannot be cancelled. It is also understood if applicant takes possession of said unit within 48 hours from execution of this application the lease cannot be cancelled.**
I, the Undersigned Applicant, have read and agree to all provisions of this application. I HAVE READ AND FULLY UNDERSTAND THE TERMS AND CONDITIONS SET FORTH IN THIS APPLICATION. I UNDERSTAND THAT THIS APPLICATION IS A PART OF MY LEASE AGREEMENT ESPECIALLY THOSE AREAS REGARDING EARNEST MONIES. I HEREBY AUTHORIZE THE MANAGEMENT TO MAKE ANY NECESSARY INVESTIGATION AS TO THE INFORMATION CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT THIS INVESTIGATION MAY INCLUDE, BUT NOT BE LIMITED TO, A CREDIT REPORT, VERIFICATION OF EMPLOYMENT, PAST RENTAL HISTORY, AND POLICE RECORDS. I, THEREFORE, CONSENT TO THIS INVESTIGATION, AND I CERTIFY THAT ALL STATED
FACTS ARE TRUE, AND IT IS UNDERSTOOD THAT ANY MISREPRESENTATION OR OMISSION MAY BE CAUSE FOR THE MANAGEMENT AND/OR OWNERS TO REJECT THIS APPLICATION AND/OR TERMINATE MY LEASE. I HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME FOR A COMPLETE AND ACCURATE DISCLOSURE OF ADDITIONAL INFORMATION CONCERNING THE NATURE AND SCOPE OF THIS REPORT. I AUTHORIZE THE MANAGEMENT TO EXAMINE MY CRIMINAL RECORDS AND USE THE INFORMATION AS AN ADDITIONAL BASIS TO DETERMINE WHETHER THIS APPLICATION SHALL BE APPROVED OR DISAPPROVED.
Applicant represents that all of the above information is true and complete and authorizes the verification of same by reasonable means including check applicant's credit, employment, and rental history and to answer questions pertaining to applicant's credit experience with The GROVES of Clemson.

Signature of Applicant_____ Date_____

"Equal Housing Opportunity"

DEPOSIT RETURN ADDRESS: PRINT CLEARLY!

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