

Myrtle Grand Vacations

ANNUAL RENTAL APPLICATION

702 6TH Avenue South, Suite 1, North Myrtle Beach, South Carolina 29582

TEL: (843) 249-0200 * FAX: (843) 249-0247

www.MyrtleGrandRentals.com

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Applicant

Name-Last	First	Middle
Cell Phone Number	Driver's License #/State Issued	
Mailing Address	City	State Zip
Date of Birth	Social Security Number	
Other names used in the past 3 years		
Email Address:		

Co-Applicant

Name-Last	First	Middle
Cell Phone Number	Driver's License #/State Issued	
Mailing Address	City	State Zip
Date of Birth	Social Security Number	
List any changes in last name in the past 3 years		
Email Address:		

Property Information

What property are you applying for:	Rental Rate Quoted:
Date to start Lease?	Length of Lease you desire?
Who will reside in the unit & Relationship to you:	

Personal References

Name of Reference	Relationship	Telephone Number	How long have you known
Name of Reference	Relationship	Telephone Number	How long have you known
Name of Reference	Relationship	Telephone Number	How long have you known

Current and Past Residences—Must provide for the last 3 years (also use back of form to complete)

Current Address	City	State	Zip
Reason for leaving	Monthly rent or mortgage payment		
Landlord/Mortgage Holder Name	Telephone Number		
 			
Previous Address	City	State	Zip
Reason for leaving	Monthly rent or mortgage payment		
Landlord/Mortgage Holder Name	Telephone Number		
 			
Previous Address	City	State	Zip
Reason for leaving	Monthly rent or mortgage payment		
Landlord/Mortgage Holder Name	Telephone Number		

Employment History

Current Employer	Supervisor	Length of employment	Phone Number
Address	City	State	Zip
Position Held	Salary or Hourly Rate	Reason for Leaving	
Current Employer	Supervisor	Length of employment	Phone Number
Address	City	State	Zip
Position Held	Salary or Hourly Rate	Reason for Leaving	
Current Employer	Supervisor	Length of employment	Phone Number
Address	City	State	Zip
Position Held	Salary or Hourly Rate	Reason for Leaving	

Other Sources of Income—Must be able to provide supporting documents

Source of Income	Gross or Net Amount
Source of Income	Gross or Net Amount
Source of Income	Gross or Net Amount

Emergency Contact

Name of nearest relative not living with you	Telephone Number	Relationship
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Pets

Breed of Pet	Type of Pet	Age of Pet	Weight of Pet
Breed of Pet	Type of Pet	Age of Pet	Weight of Pet

Other Applicant Information

Vehicle Information	Make	Model	Year	Color	License Tag
Vehicle Information	Make	Model	Year	Color	License Tag
Have you or anyone that will reside in the unit been convicted of a felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of a drug felony? (If so, provide offense and date of charge)					
Have you or anyone that will reside in the unit been convicted of sexual misconduct? (If so, provide offense and date of charge)					

