

## **Pre-lease Reservation Agreement Addendum**

Date:	Time:	Desired Community:	# of bedrooms:					
Prospectiv	e tenant name:							
Roommate	es:							
	Admin Fee	Pre-Lease Deposit: <b>equal to one monthly installment*</b> Admin Fee: \$65* *Separate check/money order						
	overwhelming	response and limited number of unirst-served pre-lease policy.	nits coming available, we have					
desired co we receive renew the and pay y	mmunity with AP e deposits. Availa ir lease agreemer our fee, the bet	e-lease deposit secures your position of the list is structed by the list is structed by the highest structed by the number of the number of the securing the securing the securing of the sec	rictly based on the order in which of current residents who do not However, the earlier you register your desired community for the					
	e selection order	will be based on the order in which which which which is available.	we receive your deposit. You will					
and you w a complet	ill receive a lease ed parental guar	parantee: Upon notification that a unit agreement In a few weeks. Once we he antor form, APM Clemson will conversit. The security deposit is NOT your f	ave received the signed lease and ert the amount of the pre-lease					
and/or a	completed paren	<b>posit:</b> If a unit is offered and rejected, tal guarantor agreement is not receive it the pre-lease deposit.	•					
	-	:: If it is determined that no units are ave pre-lease deposit will be returned wi	· ·					
	_	ement Addendum: This document bed the pre-lease deposit is converted to t	•					
Prospectiv	e Tenant	Date _						
Pronerty N	Manager	Date						

## olicant Information

C				
Approved □ Rejected □ Rea	Pet Approve	ed 🔲		
550 Admin Fee Paid: Yes 🗆 No 🗆	Date:	Check 🗆 Money Order 🗆	Pet Agt Red	:′d □
Photo ID: Yes □ No □ Backgrou	und: Yes □ No □	Rent \$	Pet Fee Pd	



## **STUDENT APPLICATION**

## Print legibly...incomplete or illegible applications will delay the process.

Date: Student:	Yes No Curre	nt Year □Fr □So □J	r □Sr			
Community/Address Requested		Move-in Mont	:h: Year			
Co-tenants: 1	2	3	4			
			:*PET ADDENDUM REQUIRED: pet on premises. Max of 2 pets per unit.			
		<b>plication fee required for pl</b> ddress. Communications fr				
Name (first middle initial last):		Email_				
Social Security Number:	Social Security Number: Date of Birth: / / Cell Phone:					
Driver's License Number:	Driver's License Number: State:					
Father's Name:	Cell Phone: Email					
Home Address:	Home Phone:					
Mother's Name:	Cell Phone: Email:					
Home Address:	Home Phone:					
*If you do not have a gud	ırantor, you must prov	ide pay stubs that show yo	u make 3 times the monthly rent.			
Current Employer:Address:						
Phone Number:	e Number:How long have you worked here?					
Position:	ition:Salary/Pay:					
Supervisor's Name:	or's Name:Phone Number:					
Other Income:						
	Re	ental History				
Current Address:						
How long at this address?	Reason for	Leaving:				
Landlord: Landlord Phone:						
By signing, you give APM Cle	mson permission to	o check criminal, credit	, and rental references.			
Signature:		Date:				