

FIRST SOUTH HOMES RESIDENTIAL LEASE OPTION APPLICATION

Name of Applicant _____ Telephone _____

Name of spouse _____

Present Address _____

City, State, Zip _____

Social Sec. No. _____ Driver's No. _____

Birth date _____

Spouse's Social Sec. No. _____

Spouses Driver's Lic. No. _____

Spouse's Birth date _____

How many in your family? Adults ____ Children ____ Pets? _____

How long have you lived at the present address? _____

Landlord _____ Telephone _____

Downpayment available\$ _____

Employer _____ Position _____

How long? _____ Telephone _____

Salary _____ Spouse Salary _____

I represent that the information provided in this application is true to the best of my knowledge. You are hereby authorized to verify my credit and employment references in connection with the processing of this application. I acknowledge receipt of a copy of this application.

Applicant

Co-Applicant

- Please answer ALL of the above questions and fax to (615)807-3838
- You may use the back of this form for additional information