

SIMMONS & HARRIS, INC.
1175 Jeffrey Road
P.O. Box 1398
Rocky Mount, North Carolina 27802-2398
(252) 977-1616 / Fax # (252)977-1619

LEASE APPLICATION

(Property Desired)

PERSONAL INFORMATION

Applicant's Full Name _____ **Date of Birth** ____/____/____

Social Security No. ____-____-____ **Driver's Lic. No. /State** _____

Phone _____ **Fax** _____ **Mobile Phone** _____

E-Mail Address _____

Co Applicant's Full Name _____ **Date of Birth** ____/____/____

Social Security No.: ____-____-____ **Driver's Lic. No. /State** _____

Phone _____ **Fax** _____ **Mobile Phone** _____

...A Credit Report Will Be Obtained On All Applications...

RESIDENCE HISTORY

Present Address _____

Present Telephone _____ **Dates From** _____ **to** _____

Present Landlord or Mortgage Co. _____ **Telephone** _____

Monthly Payment \$ _____

EMPLOYMENT INFORMATION (Please ✓ box to indicate)

Self Employed

Present Employer

Name _____ **Dates From** _____ **to** _____

Employer's Address _____ **Telephone** _____

Position _____ **Supervisor** _____ **Gross Monthly Salary \$** _____

PROPOSED BUSINESS

Business Name _____ **Type of Business** _____

Description of Business _____

Applicant Signature _____ **Date** _____

Please provide a copy of your current corporate and Personal Financial Statements along with this application



North Carolina Association of REALTORS®, Inc.



Simmons and Harris, Inc.
1175 Jeffreys Road
P.O. Box 1398
Rocky Mount, NC 27802-1398

AUTHORIZATION TO OBTAIN INFORMATION

I/We have applied for a lease agreement with Simmons and Harris, Inc. As part of the application process, Simmons and Harris, Inc. may verify information contained in my/our application and seek any other information required in connection with the lease for the purpose of determining whether or not to enter into a lease with me/us.

Simmons and Harris, Inc. may address this authorization to any party named in the lease application and to any other such parties as Simmons and Harris, Inc. deems appropriate. I/We authorize such parties to provide Simmons and Harris, Inc. with any information and documentation they request. Such information includes but is not limited to rental history, employment history, income, banking information, account balances, credit history, and copies of income tax returns.

I/We hereby consent to allow Simmons and Harris, Inc. and its agents and representatives to conduct a comprehensive review of my/our background through a consumer credit report and/or criminal background report. I/We understand that the scope of the consumer credit report/criminal background report may include, but is not limited to, the following area: verification of social security number, current and previous residences, credit history and reports, criminal history records from any criminal justice agency in any or all federal, state, and county jurisdictions, motor vehicle records to include traffic citations and registration, and any other public records. Simmons and Harris, Inc. shall have a continuing right to obtain and review subsequent consumer credit report and/or criminal background reports during my/our tenancy.

(Applicant)

(Date)

(Social Security Number)

(Co-Applicant)

(Date)

(Social Security Number)

PERSONAL FINANCIAL STATEMENT

Personal Information

Name of First Individual		Name of Second Individual	
Home Address	Years at Address	Home Address	Years at Address
City, State, Zip	Birthdate	City, State, Zip	Birthdate
Social Security No.		Social Security No.	
Employer	Years at Employer	Employer	Years at Employer
Home Phone	Work Phone	Home Phone	Work Phone

ANNUAL INCOME AND EXPENDITURES FOR YEAR ENDED:

GROSS ANNUAL INCOME	BORROWER(s)	ANNUAL EXPENDITURES	
Salary, Bonuses, Commissions		Mortgage/Rental Payment	
Dividends, Interest		Real Estate Taxes & Assessments	
Real Estate Income		Taxes (Federal, State, Local)	
Other Income		Insurance Payments	
		Interest & Principal Payments on Loans	
		Alimony, Child Support Maintenance	
		Other Expenses (List)	
Total Income	\$ -	Total Annual Expenditures	\$ -

*Alimony, Child Support or Separate Maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

STATEMENT OF FINANCIAL CONDITION AS OF:

Assets	Amount	Liabilities	Amount
Cash on Hand		Notes Payable to Bank	
Deposits in Bank (Sch A)	\$ -	Real Estate Mortgage Debt (Sch D)	\$ -
Readily Marketable Securities (Sch B)	\$ -	Notes Payable to Others	
Non-Readily Marketable Securities (Sch C)	\$ -	Accounts Payable (Incl. Chg. Cards) (Sch F)	\$ -
Accounts and Notes Receivable		Life Insurance Loans (Sch E)	\$ -
Real Estate (Sch D)	\$ -	Other Liabilities (List)	
Cash Value of Life Ins. (Sch E)	\$ -	Taxes Payable	
IRA, Keogh, Profit Sharing and other Vested Retirement Accounts			
Automobiles (List)			
Personal Property/Other Assets			
		Total Liabilities	\$ -
		Net Worth (Total Assets - Total Liabilities)	\$ -
Total Assets	\$ -	Total Liabilities and Net Worth	\$ -

SCHEDULE A - Checking Accounts, Savings Accounts, Certificates of Deposit, and Money Market Funds, Etc.

Financial Institution	Account Type	Owner of Account	If Pledged, to Whom?	Balance
Total				\$ -

SCHEDULE B - U. S. Government Bonds & Marketable Securities

No. of Shares or Value of Bonds	Description Of Security	Marketable or Non-Marketable	In Name(s) Of	Are these Registered pledged or held by other	Exchange Where Traded	Market Value
Total						\$ -

SCHEDULE C - Non Marketable Securities (including closely held business ventures)

Name of Business	Type of Business	Your Position/Title	Percent You Own	Year in Business	Type of Security	Market Value
Total						\$ -

SCHEDULE D - Personal Residence & Real Estate Investments, Mortgage Debt (Attach Additional Schedule if Necessary)

Type of Property	Legal Owner	Purchase Yr./Price	Curr. Loan Balance	Monthly Payment	% Owned	Market Value	
Total			\$ -	Total			\$ -

SCHEDULE E - Life Insurance Carried

Name of Insurance Company	Owner of Policy	Beneficiary & Relationship	Type of Policy	Face Amount	Policy Loans	Cash Surrender Value
Do you have Disability Insurance? (If yes, monthly amount)				Total	\$ -	\$ -

SCHEDULE F - Loans Owing Banks, Broker, Finance Companies, and Others (MasterCard, Visa, Etc.)

Owing to (Acct. No.)	(U)	Type of Loan	Monthly Payment	Date of Final Payment	Secured By	Loan Balance	
Total			\$ -	Total			\$ -

Applicant History Information

Are you a guarantor, co-maker or endorser for any debt of an individual, corporation, or partnership?	Do you have any outstanding letters of credit or surety bonds?	Are there any suits or legal actions pending against you?	Are you contingently liable on any lease or contract?	Are you currently delinquent on any Federal or State Tax Obligation?	Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?	Do you have a will?
___ Yes ___ No	___ Yes ___ No	___ Yes ___ No	___ Yes ___ No	___ Yes ___ No	___ Yes ___ No	___ Yes ___ No

Date Signed _____ Signature (First Individual) _____
 Date Signed _____ Signature (Second Individual) _____