

Anderson

REAL ESTATE

202 East Morgan Street
Phone 704 694-5050
I.P. 704-690-1933

• Wadesboro NC 28170
• FAX 704 694-9341
carroll@andersonrealestate.org

Personal Information

Applicants:

Name: _____ S.S.# ____ - ____ - ____ D.O.B. __/__/__

Address: _____ City: _____ ST: _____ Zip: _____

Phone#: _____ Work#: _____ Marital Status: _____

How many people will live in the home _____

Email address: _____

CO-Applicant:

Name: _____ \$.\$.# _____ D.O.B. __/__/__

Address: _____ City: _____ ST: _____ Zip: _____

Phone #: _____ Work# _____ Marital Status: _____

Email address: _____

Has either applicant served or is currently serving in the military? Y N

Rental/ Mortgage History

Do you rent from an Individual or Management company? _____

Do you pay rent in Cash, check or Money order? _____

How much do you pay per month? _____

Name, Address Phone # of current Landlord. _____

Purchase or Refinance Applicants

In the past 12 months, how many rent/mortgage payments have been past due over 30 days? _____

Employment History for the past 2 years

Company: _____ Position: _____

Years at present employer: _____ Years in line of work? _____

Gross monthly income: _____ Additional Income: _____

Company: _____ Position: _____

Years at present employer: _____ Years in line of work? _____

Gross monthly income: _____ Additional income: _____

Company: _____ Position: _____

Years at present employer: _____ Years in line of work? _____

Gross monthly income: _____ Additional income: _____

I certify that the above information is correct as of the date set forth below. I/we understand that any intentional or negligent misrepresentation of information above may result in civil liability and or criminal penalties. Verification of any information contained in this application may be made at anytime by its lender, agents directly through credit reporting agency and from any source named in this application.

Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____