CAMPBELL PORTABLE BUILDINGS, LTD. Rent to Own Application

Name			Employer Information		For Office Use Only:
			Name	How Long	Dealer
(First)	(MI.)	(Last)			
Date of Birth		Employer's Phone Number		Sales Tax Rate	
(Month)	(Day)	(Year)	Spouse's Employer	How Long	Amount Paid
Social Security Nu	mber				
			Spouse's Employer Pho	one Number	Cash/Check #/MO/CC
Texas Drivers License Number			Residence		
			Years @ Residence		
			Rent Residence		
Home Phone Number			Own Residence		
_			Land that building will be located		
			Rent Land		
Cell Phone Number			Own Land		
			(If either are rented, the Landowner's Permission Form must be signed		
			and returned with Rent to	Own Contract.)	-
Work Phone Number			Name of Landlord		
			Landlord's Phone		
Physical Address			Spouse or Co-Renter		Building Information
					Style
			(First) (N	MI.) (Last)	
(City)	(St)	(Zip Code)	Social Security Number	7	Size
Mailing Address					
			Phone Number		Color
(City)	(St)	(Zip Code)	Address		Serial Number
Email address					
					Cash Price
Name of Financial	Institution		(City) (S	St) (Zip Code)	
			Enroll in Auto Pay?		
Phone Number			Yes (include form)		
			No		
References (not liv	ing in same	household, 3 re	quired)		
Name			Relationship Phone #		

By affixing my (our) signature(s) below, I (we) certify the information supplied by me on this form is true and correct, and hereby authorize the release of any information, deemed necessary by lessor, relating to employment, income and existing or prior leases including property/landlords. Any false statement can be sufficient basis for rejection of this order. I have read and understand this statement.

Signed:	Date:
Signed:	Date: