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**LAGOS STATE MINISTRY OF HOUSING
(LAGOSHOMS)
RENT-TO-OWN APPLICATION FORM**

Affix Two Passport
Photographs
with full name,
signature &
Date behind

SECTION A – PERSONAL DETAILS

TITLE: (MR./MRS./MS./MISS).....
SURNAME MIDDLE FIRST

PREVIOUS NAME/MAIDEN NAME (IF APPLICABLE).....

LASSRRA NUMBER:

L	A																		
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 BANK VERIFICATION NUMBER.....

GENDER: MALE FEMALE DATE OF BIRTH: (DD/MM/YYYY)..... PLACE OF BIRTH (CITY/TOWN).....

MARITAL STATUS: SINGLE MARRIED SEPERATED DIVORCED WIDOW

TELEPHONE NUMBER(S):..... E-MAIL ADDRESS(ES):.....

STATE OF ORIGIN:..... LG/LCDA

CURRENT RESIDENTIAL ADDRESS: (HOUSE/FLAT/PLOT NUMBER).....

LOCALITY (TOWN/AREA WHERE STREET IS LOCATED)..... LG/LCDA

HOW LONG AT THIS ADDRESS:..... CURRENT RENT PAYMENT: ₦..... LEASE EXPIRES:.....

LANDLORD/AGENT'S NAME:..... LANDLORD/AGENT'S TEL NUMBER: (.....).....

ADDRESS OF LANDLORD/AGENT.....

WHAT IS THE SIZE OF YOUR FAMILY? (INCLUDE ANYONE WHO LIVES WITH YOU).....

LIST OF FULL NAMES OF CHILDREN/DEPENDANTS WHO WILL BE RESIDING IN THE PROPERTY

- 1. 2.
- 3. 4.
- 5. 6.

SECTION B (I) – EMPLOYMENT DETAILS

IF YOU ARE SELF-EMPLOYED, PLEASE PROCEED TO SECTION B (II)

DETAILS OF CURRENT EMPLOYMENT

OCCUPATION:..... JOB DESCRIPTION.....

.....

FULL – TIME PART –TIME OTHERS (PLEASE SPECIFY)

CURRENT EMPLOYER’S NAME:.....ADDRESS.....

.....

DATE EMPLOYED: (DD/MM/YYYY).....TOTAL MONTHLY SALARY (AFTER TAX).....

TOTAL ANNUAL SALARY.....

(PLEASE ATTACH COPIES OF YOUR OFFER OF EMPLOYMENT AND MONTHLY PAYSLIPS FOR THE LAST 3 MONTHS)

SECTION B (II) – DETAILS OF SELF-EMPLOYMENT

HOW LONG HAVE YOU BEEN SELF-EMPLOYED?.....

WHAT IS THE NATURE OF YOUR BUSINESS? (PLEASE SPECIFY).....

.....

WHAT PERCENTAGE OF THE BUSINESS DO YOU OWN?.....

WHEN WAS THE BUSINESS ESTABLISHED (DD/MM/YYYY).....

PRINCIPAL ADDRESS OF THE BUSINESS.....

.....

COMPANY OR BUSINESS NAME REGISTRATION DETAILS (IF AVAILABLE)–: REG. NO DATE OF REG:.....

(PLEASE ATTACH EVIDENCE OF INCORPORATION OR BUSINESS NAME OR LETTER FROM YOUR UNION AND OTHER RELEVANT DOCUMENTS)

WHAT IS YOUR TOTAL MONTHLY INCOME AFTER TAX:.....

WHAT IS YOUR TOTAL ANNUAL INCOME AFTER TAX:.....

(PLEASE ATTACH EVIDENCE OF TAX PAYMENT AND PROVIDE BANK STATEMENTS FOR THE LAST 3 MONTHS)

SECTION B (III) – DETAILS OF COOPERATIVE OR UNION

DO YOU BELONG TO A COOPERATIVE? YES NO

WHAT IS THE NAME OF YOUR COOPERATIVE.....ADDRESS.....

.....

DO YOU BELONG TO A UNION? YES NO

WHAT IS THE NAME OF YOUR UNION?ADDRESS.....

.....

(PLEASE ATTACH LETTER FROM YOUR COOPERATIVE / UNION AND OTHER RELEVANT DOCUMENTS)

SECTION C – PROPERTY INFORMATION

WHAT TYPE OF PROPERTY ARE YOU APPLYING FOR? (PLEASE TICK **ONE** ONLY)

1-BEDROOM FLAT 2-BEDROOM FLAT 3-BEDROOM FLAT ROOM & PALOUR

1-BEDROOM BUNGALOW 2-BEDROOM BUNGALOW 3-BEDROOM BUNGALOW

WHERE IS THE PROPERTY LOCATED? (PLEASE INCLUDE NAME & LOCATION OF HOUSING SCHEME).....

.....

DECLARATION (TO BE SWORN BY APPLICANT)

I.....OF.....

.....

DO HEREBY AND SINCERELY DECLARE AND SAY THAT THE INFORMATION GIVEN IN THIS APPLICATION FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE, AND HEREBY SOLEMNLY UNDERTAKE TO ACCEPT ANY CONTRARY DECISION THAT MIGHT BE TAKEN AGAINST ME IF IT IS FOUND OUT OR DISCOVERED THAT ANY OF THE INFORMATION GIVEN BY ME ABOVE IS NOT CORRECT

.....
SIGNATURE/MARK OF DECLARANT/APPLICANT

The foregoing having been read over to the illiterate Declarant / Applicant

Mr./Mrs./Miss:.....in theLanguage by the

Interpreter Mr./Mrs./Miss:.....

When he/she seemed perfectly to understand the support of the same before affixing his / her thumb impression

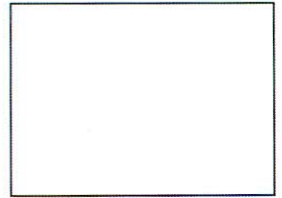
Sworn to atRegistry.....

This day of 20.....

BEFORE ME

.....
Commissioner for Oaths/Notary Public/Magistrate/Justice of the Peace

GUARANTOR'S FORM



TITLE: (MR./ MRS./MS./MISS).....SURNAME:.....FIRST NAME:.....OTHER NAME(S)

PREVIOUS NAME/MAIDEN NAME (IF APPLICABLE).....

LASSRRA NUMBER:

L	A																		
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TELEPHONE NUMBER(S):..... E-MAIL ADDRESS(ES):.....

STATE OF ORIGIN:..... LG/LCDA

LOCALITY (TOWN/AREA WHERE STREET IS LOCATED)..... LG/LCDA

CURRENT RESIDENTIAL ADDRESS:.....

.....

OCCUPATION..... NATURE OF JOB

CURRENT BUSINESS ADDRESS:.....

.....

DECLARATION (TO BE SWORN TO BY GUARANTOR)

I,.....OF.....

.....

do hereby and sincerely declare and say that the applicant is well known to me and is a person to whom government housing unit could be safely allotted. I also declare that the information given in this form is correct to the best of my knowledge, and hereby solemnly undertake to accept any decision that might be taken against me if it is found out or discovered that any of the information given by me above is not correct.

.....
SIGNATURE/MARK OF DECLARANT/APPLICANT

The foregoing having been read over to the Illiterate Declarant / Applicant

Mr./Mrs./Miss:.....in theLanguage by the

Interpreter Mr./Mrs./Miss:.....

When he/she seemed perfectly to understand the support of the same before affixing his / her thumb impression

Sworn to atRegistry.....

This day of20.....

BEFORE ME

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Commissioner for Oaths/Notary Public/Magistrate/Justice of the Peace

