

COMMERCIAL LEASE APPLICATION

A separate application is required for each business partner and the co-signer (if applicable).
PLEASE PRINT LEGIBLY. Complete this application with all pertinent details. If accepted this application becomes a part of the lease agreement.
A misrepresentation of facts in this Application is justification for immediate termination of your tenancy.

ADDRESS OF PROPERTY BEING APPLIED FOR

Address: City State Zip

PERSONAL

Applicant Full Name: SS # Date of Birth Home Tele # Cell #
Present Home Address City State Zip
How Long At This Address Own or Rent E-mail
If You Rent: Owner/Manager: Tele #
Drivers Lic. # State where issued
Vehicle Make, Model & Year License #
In Case of Emergency Contact Relationship Tele #
Address: City State Zip
Have you ever been evicted (business or residential), asked to vacate, or had any judgments levied against you? Y/ N Ever file Bankruptcy? Y/ N
Give dates and particulars

BUSINESS

Corporation/Business Name Business Tele #
(Please provide us with an Articles of Organization & Corporate Resolution indicating authority of person who will be signing lease.)
Sole Prop. Partnership Corp.
Principal #1: Full Legal Name: Title:
Principal #2: Full Legal Name: Title:
Year Established Employer ID# Number of Employees
Type of Business Website:
Flammable or Hazardous Materials and amounts that will be stored on site (i.e. gas, paint, propane, oil, solvents, etc.)

BUSINESS RENTAL HISTORY

Present Business Address Tele #
Rent Own Rental/Mortgage Amount Paid Monthly From/To
How Long at this Address Reason for Leaving:
Landlord Name/Mortgage Co. Tele #

EMPLOYMENT HISTORY

Current Employer Tele #
Address: City State Zip
Supervisor Tele #
Gross Monthly Salary Position How Long
Previous Employer Tele #
Address: City State Zip
Supervisor Tele #
Gross Monthly Salary Position How Long

BUSINESS BANKING REFERENCE

1) Bank Officer Tele #
Address: City State Zip
Account # Account Type Branch Balance
2) Bank Officer Tele #
Address: City State Zip
Account # Account Type Branch Balance
3) Bank Officer Tele #
Address: City State Zip
Account # Account Type Branch Balance

BUSINESS REFERENCES

1) Company Tele #
Address City State Zip
2) Company Tele #
Address City State Zip
3) Company Tele #
Address City State Zip

PERSONAL FINANCIAL

Assets

1. Savings & Checking

\$

2. Stocks & Bonds

\$

3. Real Estate Assets

\$

4. Life Insurance

\$

5. Automobiles

\$

6. Other (personal possessions, etc.)

\$

TOTAL ASSETS

\$

Liabilities

Loans –Banks, Financial Institutions

\$

Mortgages-Real Estate

\$

Auto Loans

\$

Other Accounts Payable

\$

\$

\$

TOTAL LIABILITIES

\$

Average Monthly Income

Salary (or other primary

Income source)

\$

Interest, rent, dividends, etc.

\$

Other

\$

\$

TOTAL MONTHLY INCOME

\$

Average Monthly Expenses

Living Expenses (rent, food,

clothing, medical, etc.)

\$

Insurance, loan payments

\$

Automobile Payments

\$

Other

\$

TOTAL MONTHLY EXPENSES

\$

1. Banking Reference (Savings & Checking)

Bank	Address	Officer	Tele #	Account #	Balance

2. Stocks & Bonds/Securities

Number Of Shares	Description	In Name Of	Are These Pledged?	Value

3. Real Estate Owned

Address & Type of Property	Title in Name Of	% Of Ownership	Date Acquired	Cost	Current Market Value	Monthly Mortgage Payment P & I	Mortgage Balance

4. Life Insurance

Name of Insurance Company	Owner Of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

5. Automobiles

Make/Model	Year	Current Market Value	Monthly Payment	Loan Balance

I (we) hereby authorize any person or company to supply you with any information requested concerning me (us).

This is to inform you that as part of our procedure for processing your application, an investigation and consumer report may be prepared whereby information is obtained through personal interviews with your current Landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living. You have the right to make a written request within a reasonable period of time, to receive additional detailed information about the nature and scope of this investigation.

I (we) fully understand that misrepresentation or concealment relative to any of the above facts will, at Lessor's option, void our rights under any agreement entered into and loss of any deposits for the rental or premises being applied for.

In consideration of the Lessor reserving this unit for me, I hereby waive all rights to any sums tendered herewith, which will be retained by the Lessor as liquidated damages in the event I do not choose to enter into the Lease Agreement applied for herein.

Applicant

Date