COMMERCIAL RENTAL APPLICATION

Landlord/Lessor:	Date of Application:
Location of Leased Premises:	
Center Suite #	S.F
Business Name:	Rent □ Own □ Rent/Payment
Name of Person who will sign lease:	
Person 1:	
(First) (Middle) (Last)	Conditions and Information
Street Address:	
City State Zip	All pages of this lease application must be signed by all persons who will sign the lease agreement. Additional
Phone Number (Work):	tenant information is on page 2.
Phone Number (Home):	The completing of this application by Tenant and the
Phone Number (Mobile):	acceptance of this application by Landlord creates no obligation of Landlord to approve the application.
E-mail Address:	This application will be approved or rejected usually
Driver's License No. State of Issuance:	within five (5) days of being submitted to landlord.
Social Security Number: Date of Birth:	However, there is no obligation of Landlord to notify tenant unless the application is approved.
Is your business a corporation, LLC or other entity? Yes No	If this application is approved, Tenant must make the
- If yes, what form of business entity?	security deposit and sign the lease before the tenancy begins.
- Federal Tax ID Number:	
- State in which entity formed?	The information provided herein shall be kept confidential and will only be used by Landlord, and its
- Names of Person(s) who will Guarantee Lease	agents to determine approval of Tenant's application.
- Person 1:	
- Person 2	For Landlord's Use Only
(Will need to fill out a separate form unless married)	Rent Amount:
Proposed use of premises?	Deposit:
Experience in business (please describe):	Date Lease to begin:
	End of Lease:
	End of Ecdse.
COMMERCIAL RENTAL HISTORY	
Present Address:	
Rent Own Rent/Payment From/To:	
Previous Address:	
(Continued on Page 2))
By your signature hereon, you agree that the information disclosed by	
best of your knowledge, and you agree that the information disclosed decision with respect to granting or denying your application to enter	
. 5 5 , 1, 1	
Signed:	Date:



CREDIT REFERENCE (CUE	rent or former lan	dlarda banka	, vandara eta)		
CREDIT REFERENCE (curi Name:	ent of former land	ulorus, bariks	s, vendors, etc.)		
Address:					
City State Zip			Disc		
Contact:			Phone:		
CURRENT MONTHLY INC					
Name/Source	Amount		Name/Source	Amount	
CURRENT MONTHLY EXP	ENSES				
Creditor	Amount		Creditor	Amount	
ASSETS	VALUE	SOURCE	LIABILITIES	AMOUNT	CREDITOR
Cash on Hand & in Banks			Accounts Payable		
Savings Accounts	-		Notes Payable to Banks	-	-
IRA/Retirement Accounts			Auto Payments		
Accounts Receivable			Other Installment Accounts		
Insurance Cash Surrender			Loans on Life Insurance		
Stocks & Bonds			Mortgages on Real Estate		
Real Estate			Unpaid Taxes		
Automobiles			Other Liabilities		
Other Personal Property			Other Liabilities		
Other Assets					
Other Assets			TOTAL LIABILITIES:		
Other Assets					
TOTAL ASSETS:			NET WORTH:		
	CC	NSENT TO	CREDIT CHECK		
I,				ed applicant(s) authorize
I,, the undersigned applicant(s) authorize landlord,, or his/her/their agent to order and review my/our credit and					
criminal history and investigate the accuracy of the information contained in the application. I/We					
further authorize all banks, employers, creditors, credit card companies, references, and any and all other					
persons to provide to La	ndlord any and	all informat	ion concerning my/our cred	dit.	
Charact			5 :		
Signed:			Date:		

