COMMERCIAL LEASE APPLICATION

Date://	
1. LANDLORD INFORMATION.	
Landlord/Lessor:	
Square Feet (SF): Pro	operty Name (if any):
2. THE BUSINESS.	
Business Name:	
	fail Address:
Type of Entity: □ - LLC □ - Corporation	n □ - Partnership □ - Other
State of Incorporation:	
Federal TAX ID Number (FEIN):	
Business Type:	(e.g. "pharmacy", "convenience store", etc.)
3. TENANT INFORMATION.	
Owner / Principal:	
Ownership Percentage: %	
Title: □ - President □ - CEO □ - Vice F	President 🗆 - Other
Driver's License Number:	State:
	Expiration Date:
Social Security Number (SSN):	
2nd Owner / Principal:	
Ownership Percentage: %	
Title: □ - President □ - CEO □ - Vice F	President 🗆 - Other
Driver's License Number:	State:

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Issued Date:	Expiration Date:		
Social Security Number (S	SSN):		
4. LEASE GUARANTEE			
Name(s) of the Person(s)	that will Guarantee the Lease:		
Person 1:			
Person 2:			
5. RENTAL HISTORY.			
Present Address:			
Cost: \$	_ / Month (\square - Rent \square - Own \square - Other)
If Renting, Name of Landlo	ord:	Phone:	
Previous Address:			
Cost: \$	$_$ / Month (\square - Rent \square - Own \square - Other)
If Rented, Name of Landlo	rd:	Phone:	
Previous Address:			
Cost: \$	$_$ / Month (\square - Rent \square - Own \square - Other)
If Rented, Name of Landlo	rd:	Phone:	
6. CREDIT REFERENCE	E. (Former Landlord, Bank, Vendor, etc	– NO friends/family)	
1 _{st} Reference:			
Address:			
	E-Mail Address:		
2nd Reference:			
	E-Mail Address:		

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3rd Reference:	
Address:	
Phone:	E-Mail Address:
7. CURRENT MONTHLY REV	ENUE.
Gross Revenue: \$	
Total Expenses: \$	
8. CURRENT ASSETS.	
Cash on Hand & in Banks	\$
Savings Accounts	\$
IRA/Retirement Accounts	\$
Accounts Receivable	\$
Insurance Cash Surrender	\$
Stocks & Bonds	\$
Real Estate	\$
Vehicles	\$
Other Personal Property	\$
Other	\$
Other	\$
Other	\$

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TOTAL ASSETS:

9. CURRENT LIABILITIES.

Accounts Payable	\$	
Notes Payable to Banks	\$	
Auto Payments	\$	
Other Installment Accounts	\$	
Loans on Life Insurance	\$	
Mortgages on Real Estate	\$	
Unpaid Taxes	\$	
Other	\$	
Other	\$	
Other	\$	
TOTAL LIABILITIES	\$	
10. BANKING REFERENCES.		
1st Account Bank Name		Phone
Bank Address		
Account Number	Type 🗆 - C	hecking □ - Savings
2nd Account Bank Name		
Bank Address		
Account Number	Type 🗆 - C	hecking □ - Savings

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11. CONSENT.

I/We,	, the undersigned applicant(s) authorize			
the 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 a	all banks, employers, creditors, credit card			
companies, references, and any and all other persons to provide to Landlord any and all				
information concerning my/our credit.				
Tenant Signature	Date			
Tenant Signature	Date			

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