

COMMERCIAL LEASE APPLICATION

Landlord/Lessor: _____ Date of Application: _____

Location of Leased Premises: _____

Business Name: _____ Contact: _____

Name of Persons who will sign lease: _____

Person 1: _____ **Conditions and Information**

Driver's License No. _____ State of Issuance: _____

Social Security Number: _____ Date of Birth: _____

Person 2: _____

Driver's License No: _____ State of Issuance: _____

Is your business a corporation, LLC or other entity? Yes No

- If yes, what form of business entity? _____

- Federal Tax ID Number: _____

- State in which entity formed? _____

- Names of Person(s) who will Guarantee Lease

- Person 1: _____

- Person 2: _____

- Registered Agent Name: _____

- Address for registered agent: _____

City State Zip _____

Proposed use of premises? _____

Other Business Locations: _____

Credit References: _____

Name: _____

Address: _____

City State Zip _____

Contact: _____ Phone: _____

Name: _____

Address: _____

City State Zip _____

For Landlord's Use Only
Rent Amount: _____
Deposit: _____
Date Lease to begin: _____
End of Lease: _____

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By your signature hereon, you agree that the information disclosed by you herein is true, complete and accurate to the best of your knowledge, and you agree that the information disclosed by you herein is material to the potential Lessor's decision with respect to granting or denying your application to enter into a lease.

Signed: _____ Date: _____

Signed: _____ Date: _____

Credit References Continued:

Name: _____
Address: _____
City State Zip _____
Contact: _____ Phone: _____

Bank Information

Name	Type Of Account	Account #	City
_____	_____	_____	_____
_____	_____	_____	_____

Credit Cards

Type	Card #	Type	Card #
_____	_____	_____	_____

Creditors (Not Already listed)

Name	Monthly Payment	Balance Owed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DISCLOSURE OF MANAGER:

The Manager of the Premises is _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Comments: _____

CONSENT TO CREDIT CHECK

I/We, _____, 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 Landlord any and all information concerning my/our credit.

Signed: _____ Date: _____

Signed: _____ Date: _____