

My Suite! @ Beauty Square

Tenant Lease Application

1. PERSONAL INFORMATION

Name _____ Soc. Sec.# _____

Date of Birth ____/____/____ Driver License # _____

Address _____

City, State, Zip _____ € own € rent

Years at this address _____ Email _____

Home Phone () _____ Work Phone () _____

Educational Background _____

Please circle response:

Are you a party to any past or legal action? Yes No

Have you ever been convicted of a felony? Yes No

Have you or your business ever been involved in bankruptcy, insolvency or compromise with creditors? Yes No

If you answered "yes" to any of the above, please explain: _____

2. PROFESSIONAL INFORMATION

I. How many years active under your profession? _____

II. Do you have an extensive clientele? _____

III. In a weekly basis, how much is your take home income from your profession? _\$ _____

IV. In how many locations have you worked in the past 5 years? _____

3. CRIMINAL BACKGROUND

4. Would you allow Beauty Square to conduct a criminal background on you? _____

Signature

Date

Name