**Tenant Application**

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Entity Registration Number (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Entity: (Circle One) **LLC S CORP LLP GP Individual C Corp**

Business Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Website (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Tax ID Number (EIN): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person/Authorized Signatory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* + Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Title/Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Years in Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What is the nature of your business?
2. How do you intend to utilize the space?
3. How many daily parking spaces will you require for: Employees: \_\_\_\_\_\_\_\_\_\_\_ Customers: \_\_\_\_\_\_\_\_\_\_\_
4. Will you need overnight parking for cars, trucks, or trailers? Y / N (If yes, please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Approximately, how many truck deliveries or shipments do you anticipate handling each week? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Do you anticipate using forklifts or any other material handling devices? Y / N (If yes, please explain)
7. Please provide a brief description of any waste products generated by your operation:
8. Are there any noises or odors associated with your operation? Y / N (If yes, please explain)
9. Please list all substances used, stored, or produced by your business, including hazardous and non-hazardous materials, along with their types and brand names:
10. Please provide a list of all permits or licenses currently held or required for your business:
11. Does your operation generate hazardous or non-hazardous waste that necessitates off-site disposal? Y / N (If yes, please explain)
12. Do you store materials in drums or tanks? Y / N (If yes, please explain)
13. Have you ever received notices of violation or been found in violation of any environmental, health, or safety laws, regulations, guidelines, or ordinances? Y / N (If yes, please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
14. Please list all major equipment intended for use within the warehouse area:
15. Will you require an exhaust fan within the warehouse? Y / N (If yes, please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
16. Will your operation involve the use of hard-wired power tools? Y / N (If yes, please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declaration:**

I, [Applicant's Name]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false or misleading information provided may result in the rejection of this application or termination of the lease agreement.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_