

COMMERCIAL/RETAIL APPLICATION FOR LESSEE(S)

INFORMATION & DOCUMENTATION REQUIRED FOR PROSPECTIVE RETAIL LESSEE(S)

Dear Prospective Commercial/Retail Tenant:

Thank you for your interest in commercial/retail/office space for which the United House of Prayer (UHOP) is the Landlord.

Here are a few items that we require to process your Application and present an offer to the Landlord/CEO & Sole Trustee:

- **Complete the Application and sign the Authorization forms, as attached.** Complete an authorization form for each and every Landlord or Financial Institution in its entirety and include a fax number.
- **Any Promotional Brochures and Business Plans** you wish to share with Landlord
- **Two (2) Most Recent Business and/or Individual Tax Returns, as Completed, Signed and Filed with IRS.**

NOTE: Should the above instructions NOT be followed in the entirety, your submission will be deemed **NON-RESPONSIVE,** and WILL **NOT** be processed.

Please send information:

ATTN: UHOP COMMERCIAL PROPERTY MANAGEMENT
ccommodore@tuhop.org
mhodge@tuhop.org

You may also fax relevant information to our office at: 202-829-4717.

If there are any questions/concerns, do not hesitate to contact our Office at: 202-722-0309.

Sincerely,

Commercial Property Team

U.H.O.P COMMERCIAL/RETAIL APPLICATION FORM

Property Applying for _____ Move In: ____/____/____

Contact Phone #: _____ Cell Number: _____

Name of Business: _____ New or Existing? _____

Owner's Name _____ Social Security Number _____

Home Address: _____ Birth Date: _____

Current Business Address: _____ City/State/Zip _____

Phone: _____ Yrs at this location? ____ Phone: _____

Previous Business Name(s) (if different) _____

Previous Business Address: _____ City/State/Zip _____

Please select one: Corporation Partnership Sole Proprietor Other

Total Years in Business _____ Annual Sales/Revenue _____

Description of Business Activities _____

Federal Tax ID(s) _____

(Additional Sheet(s) May be added, if necessary, to answer any item completely)

Business Reference

Company Name: _____

Address: _____ City/State/Zip _____

Phone: _____ Fax: _____

Company Name: _____

Address: _____ City/State/Zip _____

Phone: _____ Fax: _____

Bank Reference

Name of Bank: _____ Contact Name: _____

Address: _____ City/State/Zip _____

Phone: _____ Fax: _____ Account Number: _____

Name of Bank: _____ Contact Name: _____

Address: _____ City/State/Zip _____

Phone: _____ Fax: _____ Account Number: _____

An Incomplete Application Form Can Not Be Processed!!!

I/We confirm that all the information supplied is true and correct. I/we understand that I/we can be turned down for the property if i/we have falsified any information on this application. I/we hereby authorize the verification of all above information by United House of Prayer (UHOP or Landlord or American Tenant Screen, including a business credit report. This application does not constitute a contract, lease, or agreement for space.

Company Name: _____

By: _____ Date: _____

(Authorized Signature)

FAX TO 202-829-4717 FOR PROCESSING

Date:

To:

From: United House of Prayer
Commercial Property Management Office
628 M Street NW
Washington DC 20001

Re: Account Number: _____
Account Name: _____
Account Address:

_____, Owner of the above account has given us your name as a reference.
Since _____ is interested in a store/office space we presently have for
lease, _____ has authorized you (by signature below) to answer the
following questions:

1. Does the prospect have an account with your company? _____
2. How long has this account been open? _____
3. What is the size of the account? _____
4. Is it a satisfactory account? _____

Name of person responding: _____

Title of person responding: _____

Signature: _____

Since this information is important to our decision making process, a prompt reply would be appreciated.
If possible, please FAX or EMAIL your reply to us at (202) 829 – 4717 / cconnore@tuhop.org,
and mhodge@tuhop.org .

Please contact us at (202) 722-0309 with any questions.

Signature of Authorization

Date: _____

To: _____

From: United House of Prayer

Commercial Property Management Office

628 M Street NW

Washington, DC 20001

Re: _____

The above person completed an application for a commercial lease and has given your name as Landlord reference. Please answer the following questions:

1. How long have you been the Tenant's landlord? _____
2. Has the Tenant kept the premises in a satisfactory manner? _____
3. Has rent been paid on time and all the time? _____
4. As landlord, would you want Tenant to remain in your premises? _____
5. Any other comments? _____

Name of person responding: _____

Title of person responding: _____

Signature: _____

Since this information is important to our decision making process, a prompt reply would be appreciated. If possible, please FAX your reply to us at 202-829-4717.

Please contact us at 202-722-0309 with any questions.

Signature of Authorization