



Received \$ _____ as non-refundable application fee, this
_____ day of _____, 20____ at ____ : AM or PM

Receipt #- _____.

Office Use Only	
Security Deposit	
Paid	\$
Received	
Time	
Check/M.O.	

Commercial Lease Application

Property Address: _____

Intended Use of Premises: _____

Anticipated Move in Date: _____

Applicant/Business Owner/Partner/Stockholder Information:

_____ First Name	_____ Middle Name	_____ Last Name	_____ Maiden Name
_____ Phone Number	_____ Social Security #	_____ Date of Birth	_____ Email Address
_____ First Name	_____ Middle Name	_____ Last Name	_____ Maiden Name
_____ Phone Number	_____ Social Security #	_____ Date of Birth	_____ Email Address
_____ First Name	_____ Middle Name	_____ Last Name	_____ Maiden Name
_____ Phone Number	_____ Social Security #	_____ Date of Birth	_____ Email Address

CURRENT HOME ADDRESS:

_____ Street Address	_____ City	_____ State	_____ Zip
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Commercial Business Information:

_____ Name of Business	_____ Present Address
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Business: ____ Sole Proprietor ____ Partnership ____ Corporation

Business Type: Retail____ Wholesale____ Manufacturing____ Office____ Warehouse____ Other:____

Date Business Established: _____ Number of Employees: _____

Dates At Present Address: _____

Monthly Rent Amount: \$ _____

Present Landlord Name: _____

Present Landlord Address & Phone Number: _____

Reason For Leaving Present Business Address: _____

Previous Business Address: _____

Dates At Previous Address: _____

Monthly Rent: \$ _____

Previous Landlord Name: _____

Previous Landlord Address & Phone Number: _____

Reason For Leaving Previous Business Address: _____

Banking Information:

Personal Banking Institution Name & Address: _____

Personal Banking Phone Number: _____

Business Banking Institution Name & Address: _____

Business Banking Institution Phone Number: _____

Additional Banking Institution Name(s) & Address(es): _____

Additional Banking Institution Phone Number(s): _____

Additional Information for Consideration:

Credit References:

List Commercial and/or Business References:

Company Name & Address:_____

Contact Name & Phone:_____

Company Name & Address:_____

Contact Name & Phone:_____

Company Name & Address:_____

Contact Name & Phone:_____

Credit Check Authorization:

I certify that the information provided is true, accurate, and complete. I authorize the individual and/or organization to whom this application is submitted to investigate all bank, credit, and trade references named in this application to obtain information about the credit status in order to access the suitability as a tenant/lessee.

Authorized Signature

Date

Authorized Signature

Date

Authorized Signature

Date