COMMERCIAL LEASE APPLICATION

I. THE LANDLORD.	
Landlord/Lessor:	Date:
Property Address:	
Square Feet (SF):	Property Name (if any):
II. THE BUSINESS.	
Business Name:	
Principal Office Address:	
Phone Number:	E-Mail Address:
Type of Entity: □ - LLC □ - (Corporation \square - Partnership \square - Other
State of Incorporation:	
Federal TAX ID Number (FEI	N):
Business Type:	(e.g. "pharmacy", "convenience store", etc.
III. THE TENANT.	
Owner/Principal:	
Ownership Percentage:	%
Title: \square - President \square - CEO	\square - Vice President \square - Other
Driver's License Number:	State:
Issued Date:	Expiration Dato:

Social Security Number (SSN):				
2 nd Owner/Principal:				
Ownership Percentage: %				
Title: \square - President \square - CEO \square - Vice President \square - Other				
Driver's License Number: State:				
Issued Date: Expiration Date:				
Social Security Number (SSN):				
IV. LEASE GUARANTEE.				
Name(s) of the Person(s) that will Guarantee the Lease:				
Person 1:				
Person 2:				
V. RENTAL HISTORY.				
Present Address:				
Rent: \$ / Month □ - Rent □ - Own □ - Other				
If Renting, Name of Landlord: Phone:				
Previous Address:				
Rent: \$ / Month □ - Rent □ - Own □ - Other				
If Rented, Name of Landlord: Phone:				
Previous Address:				

Rent: \$	/ Month \square - Rent \square - Own \square - Other			
If Rented, Name of Landlord: Phone:				
Previous Address:				
VI. CREDIT REFERENCE. (Former Landlord, Bank, Vendor, etc.)				
1 st Reference:				
	E-Mail Address:			
2 nd Reference:				
Phone:	E-Mail Address:			
3 rd Reference:				
Address:				
Phone:	E-Mail Address:			
VII. CURRENT MONTHLY REVENUE.				
Gross Revenue: \$	Total Expenses: \$			
VIII. CURRENT ASSETS.				
Cash on Hand & in Banks \$				
Savings Accounts \$				

IRA/Retirement Accou	nts \$			
Accounts Receivable	\$			
Insurance Cash Surrender \$				
Stocks & Bonds \$				
Real Estate \$				
Vehicles \$				
Other Personal Propert	ty \$			
Other	_ \$			
Other	_ \$			
Other	_ \$			
Total Assets: \$				
IX. CURRENT LIABILITIES				
Accounts Payable \$				
Notes Payable to Banks \$				
Auto Payments \$				
Other Installment Accounts \$				
Loans on Life Insurance \$				
Mortgages on Real Est	ate \$			
Unpaid Taxes \$				
Other Liabilities\$				
Other Liabilities\$				
Other Liabilities\$				

Total Liabilities \$				
X. BANKING REFERENCES.				
1st Account Bank Name	Phone			
Bank Address				
Account Number	Type □ - Checking □ - Savings			
2 nd Account Bank Name	Phone			
Bank Address				
Account Number	Type 🗆 - Checking 🗆 - Savings			
XI. CONSENT.				
I/We,,	/We,, the undersigned applicant(s) authorize the			
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.				
Tenant Signature	Date			

Tenant Signature _	D	ate
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