

COMMERCIAL LEASE APPLICATION

Please provide all of the information requested below. Incomplete information can delay the processing of your application.
PLEASE PRINT CLEARLY.

OCCUPANT(S)

Company _____

Address (Main Office) _____

Number

Street

City

State

Zip

DBA _____ ☐ Sole Prop ☐ Partnership ☐ Corp.

Corp. No. _____ Year Established _____

Employer ID# _____ Number of Employees _____

Type of Business _____

Gross Annual Revenue _____

Contact Person _____ Title _____

Phone # (_____) Fax # (_____)

COMMERCIAL RENTAL HISTORY (No Less Than Two Years)

Present Address _____

Number

Street

City

State

Zip

Rent _____ Own _____ Rental/Mortgage Amount Paid Monthly _____ From/To _____

Reason for leaving _____

Landlord Name/Mortgage Co. _____ Phone # (_____)

Previous Address _____

Number

Street

City

State

Zip

Rent _____ Own _____ Rental/Mortgage Amount Paid Monthly _____ From/To _____

Reason for leaving _____

Landlord Name/Mortgage Co. _____ Phone # (_____)

BANKING REFERENCE

Name _____ Phone # (_____)

Address _____

Number

Street

City

State

Zip

Account # _____ Checking _____ Savings _____ Balance _____

OTHER INFORMATION

THE PRINCIPALS

1) _____ Title _____

Last

First

Middle

Social Security # _____ Date of Birth _____

Address _____

Number

Street

City

State

Zip