

COMMERCIAL LEASE APPLICATION

Property Location Applying For: _____

\$45.00 Application Fee Received: _____

APPLICANT

NAME: _____

COMPANY NAME: _____

___ Sole Proprietor ___ Partnership ___ Corporation

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

COMPANY PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

HOW LONG COMPANY IN BUSINESS? _____ YRS _____ MTHS

TYPE OF BUSINESS: _____

OWNERS, PARTNERS AND OFFICERS, COMPLETE THIS SECTION:

1.) NAME: _____ ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

PHONE #'S (HOME) _____ (WORK) _____ (CELL) _____

2.) NAME: _____ ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

PHONE#'S (HOME) _____ (WORK) _____ (CELL) _____

BANK REFERENCES:

NAME: _____ CONTACT: _____

ACCOUNT #: _____ PHONE #: _____ FAX #: _____

TYPE OF ACCOUNT: ___ CHECKING ___ SAVINGS ___ LOAN

NAME: _____ CONTACT: _____

ACCOUNT #: _____ PHONE #: _____ FAX #: _____

TYPE OF ACCOUNT: ___ CHECKING ___ SAVINGS ___ LOAN

TRADE/VENDOR REFERENCES:

NAME: _____ CONTACT: _____

ACCOUNT #: _____ PHONE #: _____

NAME: _____ CONTACT: _____

ACCOUNT #: _____ PHONE #: _____

COMMERCIAL RENTAL HISTORY:

TIME AT CURRENT ADDRESS: _____

LANDLORD/LEASING AGENT: _____ PHONE #: _____

RENTAL AMOUNT _____

EMPLOYMENT/FINANCIAL HISTORY OF APPLICANT

EMPLOYER: _____ HOW LONG: _____

SUPERVISORS NAME: _____ PHONE #: _____

EMPLOYMENT MONTHLY SALARY (GROSS): _____

OTHER MONTHLY INCOME (PLEASE GIVE AMOUNT AND EXPLAIN): _____

In the event that any information provided is not accurate at the time this application is submitted, any lease agreement later entered into may be terminated upon 24 hours notice to tenant. CANCELLING AN APPROVED APPLICATION AFTER 72 HOURS FORFEITS YOUR SECURITY DEPOSIT!

I (We) Understand That A Non-Refundable Application Fee is charged each rental applicant and that an investigation will be made of me (us) which will provide information on my (our) credit standing, character, mode of living, criminal record & reputation. By signing this application I (we) give my (our) permission for this investigation. I (we) understand that the acceptance or rejection of this application may or may not be based upon information gathered in this investigation and is at the sole discretion of the Landlord or Frank Poe Real Estate Company, Inc.

APPLICANT SIGNATURE: _____

TITLE : _____ **DATE:** _____

APPLICANT SIGNATURE: _____

TITLE: _____ **DATE:** _____