

COMMERCIAL LEASE APPLICATION

DATE: _____

PERSONAL:

NAME _____

ADDRESS _____

PHONE _____

SOCIAL SECURITY NUMBER _____

ADDITIONAL PARTNERS, INCLUDE SOCIAL SECURITY NUMBERS

BUSINESS:

BUSINESS NAME _____

TAXPAYER ID NUMBER _____

ADDRESS _____

PHONE _____

CURRENT LANDLORD'S NAME _____

ADDRESS _____

TYPE OF BUSINESS _____

LENGTH OF EXPERIENCE IN PROPOSED BUSINESS _____

HAVE YOU EVER FILED FOR BANKRUPTCY? _____

REFERENCES:

NAME	ADDRESS	CONTACT INFO
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1.	_____	_____
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2.	_____	_____
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3.	_____	_____
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I hereby certify that the information contained herein is accurate and true to the best of my knowledge and I hereby grant permission to investigate my background by checking credit and police records.

APPLICANT SIGNATURE

DATE