

Lease Application & Information

COMPANY NAME: _____ Phone: _____
 Business Address: _____ Zip Code: _____
 Years in Business: _____ Years at Current Location: _____ Size of Current Premises: _____
 Current Rent: _____ Number of Employees: _____ Present Lessor: _____
 Phone: _____
 Proposed Use of Premises: _____
 Will any Hazardous Materials be Stored or used on the Premises? Yes No If yes, please attach list (i.e. MSDS sheets)

TYPE OF BUSINESS ORGANIZATION: (Complete Section A, B or C) *[Please attach last two years' financial statements.]*

A. SOLE PROPRIETORSHIP / INDIVIDUAL:
 1. Owner's Name: _____ Phone: _____
 Residence Address: _____ Zip Code: _____
 Do you Own or Rent ? For How Long? _____ Date of Birth _____
 Social Sec. No: _____ Driver's License No: _____

B. PARTNERSHIP:
 1. Name: _____ Social Sec. No.: _____
 Residence Address: _____
 _____ Phone: _____
 2. Name: _____ Social Sec. No.: _____
 Residence Address: _____
 _____ Phone: _____

C. CORPORATION: Federal Tax ID: _____ Date Incorporated: _____ State of Incorp.: _____
 Parent Corp.: _____ Division/Subsidiary of: _____
CORPORATE OFFICERS:
 1. Name: _____ Title: _____
 Residence Address: _____
 _____ Phone: _____
 2. Name: _____ Title: _____
 Residence Address: _____
 _____ Phone: _____

By signing below, you hereby declare that the representation of facts contained in the foregoing application are considered part of the lease and are true and correct. If any information herein contained is false, the lease made on the strength of this application may, at the option of the Landlord, be terminated at any time. **By signing below, you authorize the Landlord and Its agents including Southern California Real Estate Services to verify the above statements including, but not limited to, individual credit information, now or any time during the lease term.**

For corporate applicants, you hereby declare that you have been given authority by the Corporation listed above to represent the facts contained in the foregoing application, and that these facts are considered part of the lease and are true and correct. If any information contained is false, the lease made on strength of this application may, at the option of the Landlord, be terminated at any time. **By signing below, you authorize the Landlord and Its agents including Southern California Real Estate Services, to verify the above statements including, but not limited to, business credit information, now or any time during the lease term.**

Signature: _____ Date: _____
 Print Name: _____ Title: _____

LEASE GUARANTOR INFORMATION: (If Applicable)

LEASE GUARANTOR: _____ Social Security No.: _____
 Residence _____ Address: _____
 Driver's License No: _____ Date of Birth _____

By signing below, you hereby agree to be the guarantor of the lease between the Lessor and above applicant(s). Additionally, you hereby declare that the representation of facts contained in the foregoing application are considered part of the lease and are true and correct. If any information herein contained is false, the lease made on the strength of this application may, at the option of the Landlord, be terminated at any time. **By signing below, you authorize the Lessor and Its agents including Southern California Real Estate Services to verify the above statements including, but not limited to, individual credit information, now or any time during the lease term.**

Signature: _____ Print Name: _____ Date: _____

BANK REFERENCES:

Checking: _____ Branch: _____ Account No.: _____
Savings: _____ Branch: _____ Account No.: _____

CREDIT REFERENCES:

| | Account No. | Phone | Contact |
|----|-------------|-------|---------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |

NOTICE TO CONSUMER

(PLEASE COMPLETE THOROUGHLY, COMPLETELY, AND LEGIBLY AND SIGN BELOW)

Thank you for seeking a rental or leasing relationship with our company: **Southern California Real Estate Services and/or Lessor and Its Agents**

In compliance with State and Federal laws, we are hereby notifying you that a CONSUMER REPORT, and/or INVESTIGATIVE CONSUMER REPORT may be obtained for use in evaluating our decision to accept your personal guarantee for the rental or lease of our property, the extension of credit in the form of providing tenant improvements, pro-rated and 'financed' through the lease terms, and may be obtained for collection purposes, in the event of a default of any of the above.

Inquiries may be made in considering your application, and the ensuing report may contain public/semi-public or private information, identification information, credit information, or other information, which could adversely affect your potential for an association with us. The report will only be obtained, according to your written instruction(s), below.

You have the right to make a direct written request to obtain copies of any reports, which may have been provided by one, or more of the following Consumer Reporting Agencies, which may have contributed to the compilation of the Consumer Report, and/or Investigative Consumer Report:

- | | | | |
|----|---|----|--|
| 1. | EXPERIAN (Formerly TRW – www.experian.com) 701 Experian Pkwy Dallas, TX 75013; or call: 1-888-397-3742 | 3. | EQUIFAX (www.equifax.com) P.O. Box 740241 Atlanta, GA 30374-0241; or call 1-800-685-1111 |
| 2. | TRANSUNION (www.transunion.com) 2 Baldwin Place Chester, PA 19022; or call: 1-800-916-8800 | 4. | APSCREEN Consumer Relations P.O. Box 1355 Newport Beach, CA 92663; or call 1-800-637-0223 |

AGREEMENT AND CONSENT

I have read this form completely, and I authorize you to obtain a Consumer Report or Investigative Consumer Report, per the outline of available information, above. **I also (by photocopy of this form) authorize Consumer Reporting Agencies, related or unrelated firms, public, private, government, law enforcement and/or other agencies and/or persons to release information in response to these inquiries, and release same from any and all liability in responding to such inquiries. I also fully indemnify any and all of those associated with this consent against any and all direct, indirect, and/or consequential, or other damages which might arise in the course and process of the use of this consent. I understand that I am authorizing this request in accordance with my rights under the Fair Credit Reporting Act, the Fair and Accurate Credit Transactions Act, and the Gramm-Leach-Bliley Act.**

Signed: _____ Date: _____

Full Name (Printed): _____

Social Security Number: _____ Date of Birth (mm/dd/yy): _____

Current Address: _____

City/State/Zip: _____

Telephone Number: _____