

Commercial Lease Application

For property at: _____

Business Information

Legal Name of Business	DBA Name (if different from Legal Name)		
Street Address (a physical address, not a P.O. Box)	City/County	State	Zip
Mailing Address (if different from Street Address)	City/County	State	Zip

Business Phone #: (____) _____ Business Manager: _____ Contact #: _____

Federal Tax ID #: _____

Date Established: _____

Type of Organization: Proprietorship C-Corp S-Corp General Partnership Limited Partnership Non-Profit LLC LLP

Briefly describe the product sold or service rendered by your business (e.g. accountant, bike shop, etc): _____

Business Financial Information

Gross Receipts/Sales (Complete accordingly for **last three (3)** years):

Current Year _____ \$ _____ Last Year _____ \$ _____ Previous Year _____ \$ _____

Identify bank(s) where applicant's/firm's accounts are maintained.

Name of Bank	Bank Address	Account No.	Type of Account	Contact	Phone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Do you have a line of credit? No Yes (**If yes, identify below**)

Source	Limit	Name of Creditor	Contact	Phone
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____

List current creditor(s) or lender(s) or loan(s) to the applicant/firm.

Name of Creditor/Lender	Type of Credit/Loan	Dollar Value	Contact	Phone
_____	_____	\$ _____	_____	_____
_____	_____	\$ _____	_____	_____

REFERENCES: Please list 3

Name:	Phone:	Address:	Relation:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Principal/Owner/Guarantor Information

1	Name	Social Security Number	DOB:
	Home Address	City/County	State Zip
	% of Ownership is Business	Gross Income*	
	Own / Rent Home?	Personal Net Worth Excluding Business Value	

2	Name	Social Security Number	DOB:
	Home Address	City/County	State Zip
	% of Ownership is Business	Gross Income*	
	Own / Rent Home?	Personal Net Worth Excluding Business Value	

*Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

~ If there are more than two applicants, please use another application and reference the business name on front. ~

<i>Has any applicant above ever been convicted of:</i>	<i>No</i>	<i>Yes – please specify, use separate page if needed</i>
FELONY CRIME		
MISDEMEANOR CRIME		
FELONY OR MISDEMEANOR THAT REQUIRED YOU TO REGISTER UNDER PC 290		
HAVE YOU EVER BEEN EVICTED?		
HAVE YOU EVER BEEN SUED FOR NON PAYMENT OF RENT		
HAVE YOU EVER BEEN A PARTY TO A LAWSUIT, (if yes provide date / type of case)		

Please attach the following

Current Bank Statement Current Balance Sheet Income Statement Business License

Certification and Authorization

The signer(s) certifies that he/she is authorized to execute the application for the business named above, and that the information in this application and any other documents submitted in connection with the application are true, correct and complete. Pursuant to the Fair Housing Law, HPMG shall not refuse to rent to any person because of race, creed, color, religion, national origin, handicap, or familial status, nor discriminate in the terms offered or services rendered. I (we), the applicant, do represent all information to be true and accurate and that owner/agent may rely on this information when investigating and accepting this application.

I hereby authorize the owner/agent to make independent investigations to determine my credit, financial, and character standing. I authorize any person or credit checking agency having any information on me to release any and all such information to the owner, their agent, or credit checking agencies. I hereby release, remise, and forever discharge from any action whatsoever, in law and equity, all owners, managers, employees and/or agents, both of the Landlord and their credit checking agencies in connection with processing, investigating, or credit checking this application, and will hold them harmless from any suit or reprisal whatsoever. I declare that a photocopy of my signature shall be as valid as the original.

Signed By: _____	Title: _____	Date: _____
Signed By: _____	Title: _____	Date: _____