



**PROSPECTIVE TENANT CREDIT APPLICATION**

COMPANY NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_ Years in Business: \_\_\_\_\_ Years at Current Location: \_\_\_\_\_  
 Size of Current Premises: \_\_\_\_\_ Current Rent: \_\_\_\_\_ Number of Employees: \_\_\_\_\_  
 Present Landlord: \_\_\_\_\_ 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 A, B or C)** [Please attach Financial Information noted below.]

**A. SOLE PROPRIETORSHIP:**

1. Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Residence Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Do you Own  or Rent  ? For How Long? \_\_\_\_\_  
 Social Security No: \_\_\_\_\_ Driver's License No: \_\_\_\_\_

**B. PARTNERSHIP:**

1. Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
 Residence Address: \_\_\_\_\_  
 \_\_\_\_\_ Phone: \_\_\_\_\_  
 Driver's License No: \_\_\_\_\_

2. Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
 Residence Address: \_\_\_\_\_  
 \_\_\_\_\_ Phone: \_\_\_\_\_  
 Driver's License No: \_\_\_\_\_

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 strength of this application may, at the option of Landlord, be terminated at any time. **By signing below, you authorize the Landlord to verify the above statements including, but not limited to, business and individual credit information, now or any time during the lease term.**

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**C. CORPORATION:** Federal Tax ID: \_\_\_\_\_ Date Incorporated: \_\_\_\_\_ State of Incorp.: \_\_\_\_\_  
 Parent Corp.: \_\_\_\_\_  Division/Subsidiary of: \_\_\_\_\_

**CORPORATE OFFICERS:**

1. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Residence Address: \_\_\_\_\_  
 Driver's License No: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Residence Address: \_\_\_\_\_  
 Driver's License No: \_\_\_\_\_ Phone: \_\_\_\_\_

By signing below, 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 herein contained is false, the lease made on strength of this application may, at the option of Landlord, be terminated at any time. **By signing below, you authorize the Landlord 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:** \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Residence Address: \_\_\_\_\_

Driver's License No: \_\_\_\_\_ DOB: \_\_\_\_\_

**LEASE GUARANTOR:** \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Residence Address: \_\_\_\_\_

Driver's License No: \_\_\_\_\_ DOB: \_\_\_\_\_

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 strength of this application may, at the option of Landlord, be terminated at any time. *By signing below, you authorize the Landlord 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: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**BANK REFERENCES:**

Checking: \_\_\_\_\_ Branch: \_\_\_\_\_ Account No.: \_\_\_\_\_

Savings: \_\_\_\_\_ Branch: \_\_\_\_\_ Account No.: \_\_\_\_\_

**CREDIT REFERENCES:**

**Account No.**

**Phone**

**Contact**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**FINANCIAL INFORMATION:**

**ENTITIES:**

- 2 Years of business financial statements, including balance sheet and income statements, prepared by and independent account.
- Authorization for entering into the transaction.

**INDIVIDUALS:**

- 2 Years of personal tax returns.
- A personal financial statement, prepared by an independent accountant.
- Verification of current assets – copies of investment accounts, banking references.