

APPLICATION FOR COMMERCIAL LEASE

PROPERTY NAME: SPACES by Susan L. Ward, LLC

APPLICANT'S NAME: _____

LEASING AGENT(S): _____



Years in business _____; as a Individual Corporation Partnership Other _____

APPLICANT INFORMATION

Applicant's Full Name: _____ Tax I.D. or SSN: _____

Present Street Address: _____ Suite: _____

City: _____ State: _____ Zip: _____ Telephone No.: _____

Project Name: _____ Tenant for How Long? _____ Move Out Date: _____

Landlord's Company Name: _____ Contact: _____ Phone: _____

Property Management Company Name: _____ Contact: _____

Assumed Name/DBA: _____ Type of Business: _____

As applicable, for all officers or partners of Applicant, list below:

	Officer's or Partner's Names	Title	Address	City	State	Phone
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____

Applicant's Previous Street Address: _____ Suite: _____

City: _____ State: _____ Zip: _____ Telephone No.: _____

Project Name: _____ Tenant for how long: _____ Move out Date: _____

Landlord's Company Name: _____ Contact: _____ Phone: _____

Contact: _____ Phone: _____

BUSINESS BANK/SAVINGS ACCOUNT REFERENCES

	Bank/Branch	Bank Officer/Phone	City/State	Account Type & Number
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

MAJOR NON-BANK CREDIT REFERENCES

Name of Creditor	Address	City/State	Phone	Contract
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Has applicant (under the above name or any other name) or any officer, partner or affiliate of Applicant ever:

a. breached a rental/lease agreement? [] No [] Yes Explain: _____

b. been sued for nonpayment of rent: [] No [] Yes Explain: _____

c. been sued for damages to rental property [] No [] Yes Explain: _____

d. declared bankruptcy: [] No [] Yes Explain: _____

e. been evicted: [] No [] Yes Explain: _____

Is Applicant or any above officer(s) or Partner(s) involved in any litigation? [] No [] Yes Explain: _____



Comments: _____

The undersigned Applicant hereby declares that the representations of fact contained in the foregoing application are true and correct. If any such representation is false, any lease hereinafter entered into between Landlord and Applicant will have been made in reliance upon such representation and may, at the option of the Landlord, be terminated at any time. Applicant authorized SPACES by Susan L. Ward, LLC to verify the above references and representations, including but not limited to, the use of credit information agencies.

Signature of Applicant: _____

Date: _____

Date: _____

Date: _____

Prepared by: _____

Date: _____

Reviewed by: _____

Date: _____