



TENANT LEASE APPLICATION

Use: ___Restaurant ___Office ___Other:_____

Square footage desired:_____ Timeframe:_____

Special Requirements for site/space:_____

Legal Entity:_____ How Long Operating?:_____

Is this a Corporation? Yes No Registered? Yes No Pending State:_____

Federal Tax I.D.: _____

Business Address: _____

Phone #: _____

Fax #: _____

Other #: _____

APPLICANT INFORMATION

Applicant's Name: _____
First Middle Last Title

Date of Birth:_____ Social Security #:_____

Driver's License #:_____ State:_____

Are you a citizen of the USA?_____ If not, what country?_____

Have you ever filed for bankruptcy?_____ If yes, please state details on a separate page.

Have you ever been convicted of a felony or misdemeanor (other than a minor traffic violation)?_____

Present Home Address:_____

Phone #: _____

Fax #: _____

Other #: _____

Do you? Own or Rent How Long? _____

Employed By:_____ Position _____

Duties/Responsibilities: _____

How Long?_____ May we contact your employer for a reference? Yes or No

Supervisor Name: _____ Phone: _____

Spouse Name:_____

First Middle Last Title

Spouse DOB:_____ Spouse Social Security #:_____

Driver's License #:_____ State:_____

Is there a co-applicant, other than spouse? _____ If so, Co-applicant must also fill out a Tenant Lease Application.

LANDLORD REFERENCES: List current Current/Previous Landlord(s)

Landlord: _____ Phone#: _____ Contact: _____

BALANCE STATEMENT:

ASSETS:		LIABILITIES:	
Cash:	\$	Mortgage:	\$
Accounts Receivable:	\$	Credit Cards:	\$
Retirement Accounts:	\$	Automobile Loans:	\$
Stocks:	\$	Student Loans:	\$
Mutual Funds:	\$	Business Loans:	\$
Real Estate:	\$	Taxes Owed:	\$
Automobile(s):	\$	Other:	\$
Other:	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total Assets:	\$	Total Liabilities	\$

Assets – Liabilities = Net Worth: \$ _____

INCOME:

Salary:	\$
Bonus/Commissions:	\$
Other Income (real estate, dividends, etc. – specify)	\$
Spouse Salary:	\$
Spouse Bonus/Commissions:	\$
Total Annual Income:	\$

I/We certify that the above is true and correct to the best of my/our knowledge. It is understood and agreed that this information is provided for the use in evaluating the applicant as a Tenant for a Lease.

Signature of Applicant

Date

Signature of Applicant

Date

Return Completed Application To:
Elizabeth Ouellette/Stephanie Krank
Powell Property Group, Inc.
Email: krankcommercial@gmail.com