



Commercial Lease Application

a(n) \_\_\_\_\_ ("Applicant")
(individual or State of formation and type of entity)

(including any Guarantor(s) indicated below) hereby submits the following information to and provides the authorizations herein contained to:

a(n) \_\_\_\_\_ ("Landlord"), and
(individual or State of formation and type of entity)

a(n) \_\_\_\_\_ ("Agent")
(individual or State of formation and type of entity)

in connection with the possible lease by Applicant of space from Landlord.

Contact Name: \_\_\_\_\_ Tax ID or EIN: \_\_\_\_\_
Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
E-Mail Address: \_\_\_\_\_
Web Page Address: http://www. \_\_\_\_\_

1. The business is Chartered/Incorporated in what states? \_\_\_\_\_
Start-up date or date of Incorporation: \_\_\_\_\_

2. Name, Address & telephone of principal(s)/major stockholder(s): \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

3. Identify the person who will execute the Lease Agreement?
Name: \_\_\_\_\_ Title: \_\_\_\_\_

4. Guarantor Name: \_\_\_\_\_ Tax ID or EIN: \_\_\_\_\_
Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
E-Mail Address: \_\_\_\_\_



5. Attorney Name: \_\_\_\_\_  
 Firm Name: \_\_\_\_\_  
 Firm Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_
6. Accountant Name: \_\_\_\_\_  
 Firm Name: \_\_\_\_\_  
 Firm Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_
7. Banker's Name: \_\_\_\_\_  
 Bank Name: \_\_\_\_\_  
 Bank Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
8. Landlord Name: \_\_\_\_\_  
 Address: **PO Box 963**  
 City: **Dunn** State: **NC** Zip Code: **28335-0963**  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
9. Prior Landlord Name: \_\_\_\_\_ (at least 2 years or 2 prior landlords)  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
10. Type of business/use desired: \_\_\_\_\_  
 11. Products/Services to be provided: \_\_\_\_\_  
 12. Number of locations currently operating: \_\_\_\_\_  
 13. Annual gross income of current operation: \_\_\_\_\_

**Credit Report/Criminal Information/Release Authorization: Applicant, and Guarantor, if applicable, hereby authorize Landlord and Agent to obtain “consumer reports” and/or “investigative consumer reports” from any consumer reporting agency and/or bureau, including commercial credit agencies or bureaus and local merchant or other associations, that Landlord and/or Agent may choose to use and to consider such reports when making any credit decisions regarding my credit application, extension of credit, or with respect to any extension or modification of existing credit. Applicant, and Guarantor, as applicable understand that such “consumer reports” and/or “investigative consumer reports” may contain information about their employment and educational background, criminal history, credit, workers comp claims, mode of living, character and personal reputation. Applicant, and Guarantor, as applicable acknowledge that there are various Federal and/or State laws such as the “Fair Credit Reporting Act” that control the issuance or use of “consumer reports” and/or “investigative consumer reports” by Landlord or Agent and Applicant, and Guarantor have voluntarily agreed that such reports can be released to Landlord and/or Agent for consideration of this credit application, extension of credit, or with respect to any extension or modification of existing credit. Applicant, and Guarantor, as applicable, hereby authorize, without reservation,**

any person or entity contacted by Landlord and/or Agent or anyone acting on their behalf, to furnish information regarding verification of my social security number, education, military record, motor vehicle reports, credit history, financial account balance and history, professional licensures, public records, criminal record and/or employment references. Applicant, and Guarantor, if applicable, represent and warrant that they have full authority to sign this Application and such instruments as may be necessary to effectuate any transaction contemplated by this Application on behalf of the party for whom they sign and that their signature binds such party.

AGREED and AUTHORIZED

**APPLICANT:**  
**Individual**

**GUARANTOR:**  
**Individual**

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Business Entity**

**Business Entity**

\_\_\_\_\_  
(Name of Entity)

\_\_\_\_\_  
(Name of Entity)

By: \_\_\_\_\_

By: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_