COMMERCIAL LEASE APPLICATION

Business Name: Principal Office Address: _____ Phone Number: _____ E-Mail Address: _____ Type of Entity: □ - LLC □ - Corporation □ - Partnership □ - Other _____ State of Incorporation: _____ Federal TAX ID Number (FEIN): _____ Business Type: _____ (e.g. "pharmacy", "convenience store", etc.) THE TENANT: Owner/Principal: Ownership Percentage: _____ % Driver's License Number: _____ State: ____ Issued Date: _____ Expiration Date: _____ Social Security Number (SSN): _____ 2nd Owner/Principal: _____ Ownership Percentage: _____ % Driver's License Number: _____ State: _____ Issued Date: _____ Expiration Date: _____ Social Security Number (SSN): _____ **RENTAL HISTORY:** Present Address: Rent: \$______ / Month □ - Rent □ - Own □ - Other _____ If Renting, Name of Landlord: _____ Phone:

THE BUSINESS:

CREDIT REFERENCE: (Ba	nk, Vendor, etc.)	
Reference:		
Address:		
Phone:	E-Mail Address:	
Reference:		
Address:		
Phone:	E-Mail Address:	
Reference:		
Address:		
Phone:	E-Mail Address:	
CURRENT MONTHLY REV	<u>'ENUE:</u>	
Gross Revenue: \$	Total Expenses: \$	
CURRENT ASSETS:		
Cash on Hand & in Banks \$		
CURRENT LIABILITIES:		
Debt Payable to Banks \$		
Other Installment Accounts\$		
Other Liabilities\$		
Total Liabilities \$		
BANKING REFERENCES:		
1st Account Bank Name	Type □ - Checking □ - Savings	
Bank Address		
2nd Account Bank Name	Type □ - Checking □ - Savings	
Bank Address		

CONSENT:	
I/We,	, the undersigned applicant(s) authorize the
Landlord, Enola Management, or his/h	er/their agent to order and review
my/our credit and criminal history and	investigate the accuracy of the information
contained in the application. I/We furth	er authorize all banks, employers, creditors,
credit card companies, references, and	d all other persons to provide to Landlord
all information concerning my/our cred	it.
Tenant Signature	Date
Tenant Signature	Date