



1188 Park Avenue
Murfreesboro, TN 37129
615-896-0000 (Phone)
615-895-0000 (Fax)

Tenant Lease Application Packet

Application must be turned in within 5 business days.

Please complete the attached Lease Application in full, write clear and legible. Insurance requirements are included. Please give this information to your insurance company to ensure required coverage.

Please attach the following Documentation with the Application

- ___ Business Profit & Loss and Balance Sheet
- ___ 2 months bank statements for Guarantors
- ___ 2 Months Pay Stubs for Guarantors
- ___ Copy of Driver's License of Lease Signer's/Guarantors

If you have any questions, please contact your Leasing Representative.

Please email the completed application, with the appropriate documentation to your Leasing Representative or deliver the application packet to Swanson Developments at 1188 Park Avenue, Murfreesboro, TN 37129.

Office hours are Monday through Thursday 7:00am to 4:30pm
Friday 7:00am to 11:00am



Lease Application - Swanson Developments, LP

TENANT INFORMATION

LEASING AGENT _____

REFERRED BY: _____

Legal Name of Entity Entering into the Lease: _____

Corporation: _____ LLC: _____ Partnership: _____ Sole Proprietor: _____ Non-Profit: _____ D/B/A: _____

State in which Entity Formed _____ Year Formed _____

Business Address _____

Federal Tax ID # _____ E-Mail _____

Phone # (_____) _____ - _____ FAX # (_____) _____ - _____

Nature of Business and Detailed Use of Premises _____

As applicable, for all officers, members or partners of Entity Entering into the Lease, list below: (use additional sheet if necessary)

Officers, Members or Partners Name	Title
1. _____	_____
2. _____	_____
3. _____	_____

MAILING/NOTICE ADDRESS PRIOR TO COMMENCEMENT DATE

Name _____ Phone Number (_____) _____ - _____

Address _____

E-Mail Address _____

MAILING/NOTICE ADDRESS AFTER COMMENCEMENT DATE

Name _____ Phone Number (_____) _____ - _____

Address _____

E-Mail Address _____



COMPANY SIGNER INFORMATION

Please fill out (Full Legal) name & title of the signer(s) on behalf of the company.

- 1. _____ Title _____
- 2. _____ Title _____
- 3. _____ Title _____

BUSINESS BANK/SAVINGS ACCOUNT REFERENCES

Bank/Branch _____ Account Number _____

Bank Contact Name and Phone Number _____

Bank/Branch _____ Account Number _____

Bank Contact Name and Phone Number _____

ONE PERSONAL REFERENCE AND ONE BUSINESS REFERENCE

Name _____ Phone Number (_____) - _____ - _____

Address _____

Name _____ Phone Number (_____) - _____ - _____

Address _____

I hereby AUTHORIZE the making of whatever credit inquiries are deemed necessary in connection with my credit application or over the terms of the lease agreement or in the course of review or collection of any of credit extended in reliance on the application. I authorize and instruct any person or consumer reporting agency to compile and furnish any information it may have or obtain in response to such credit inquiries, background check, employment verifications and agrees that same shall remain your property whether or not credit is extended. I have read the foregoing application and the statements made in it are true and correct. Must be signed by all tenants.

Signature Title Date / /

Signature Title Date / /



GUARANTOR INFORMATION

GUARANTOR (FULL LEGAL) NAME (ATTACH ADDITIONAL SHEETS IF NECESSARY)

1. _____

SS#/Tax ID _____ / _____ / _____ Phone (_____) _____ - _____ DOB _____ / _____ / _____

Are you a legal citizen of the United States? YES NO MOBILE:(_____)- _____ - _____

Home Address _____

Email Address _____

Current Place of Employment: _____ Work Phone #: _____

Bank Information: Name of Bank Used _____ Account Number _____

Bank Contact name and Phone Number _____

2. _____

SS# _____ / _____ / _____ Phone (_____) _____ - _____ DOB _____ / _____ / _____

Are you a legal citizen of the United States? YES NO MOBILE:(_____)- _____ - _____

Home Address _____

Email Address _____

Current Place of Employment: _____ Work Phone #: _____

Bank Information: Name of Bank Used _____ Account Number _____

Bank Contact name and Phone Number _____

I hereby AUTHORIZE the making of whatever credit inquiries are deemed necessary in connection with my credit application, or during the terms of the lease agreement or in the course of review or collection of any of credit extended in reliance on the application. I authorize and instruct any person or consumer reporting agency to compile and furnish any information it may have or obtain in response to such credit inquiries, background check, employment verifications and agrees that same shall remain your property whether or not credit is extended. I have read the foregoing application and the statements made in it are true and correct. Must be signed by all signers and tenants. Add more lines if needed.

Name (please print) _____ / /
Date

Signature of Individual _____ / /
Date

Name (please print) _____ / /
Date

Signature of Individual _____ / /
Date



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Swanson Companies Insurance Requirements

Tenant is required to provide insurance in accordance with the Lease Agreement; please share this information page with your insurance agent so they can provide the proper coverage. A sample certificate of insurance (COI) is attached for reference purposes. Please contact our Leasing Coordinator, Debra at debra@swansoncompanies.com if you have any questions or need additional information.

1. Leased address including suite #, if applicable, city, state and zip code must be on the COI.
2. Minimum Coverage Limits: (limit can be met with umbrella policy)
 - General Liability - \$2,000,000.00 per occurrence
 - General Aggregate - \$4,000,000.00
 - Workers' Compensation and Employers Liability Insurance with statutorily mandated limits
 - Automobile Liability Insurance, including owned, non-owned and hired car liability - \$2,000,000
3. **Swanson Developments, LP, 1188 Park Avenue, Murfreesboro, TN 37129** must be listed as **certificate holder** and **additional insured**.
4. Waiver of Subrogation
5. Please email the certificate of insurance to debra@swansoncompanies.com
6. Certificate of Insurance must be given to and approved by Lessor No later than the day of lease signing. Keys will not be issued to Tenant until Lessor has received the approved COI.

Insurance Maintained by Tenant Details.

Property Insurance providing protection against any peril included within the classification of "Causes of Loss – Special Form", including supplemental policies for sprinkler leakage, and covering (i) all leasehold and other interior improvements in the Premises regardless of who performed such improvements, including, without limitation, any Tenant Improvements; (ii) all personal property of Tenant located in or at the Premises, including, without limitation, Tenant's Personal Property; and (iii) loss of income or business interruption insurance in the form of a Business Income Endorsement.

With respect to improvements or alterations permitted under this Lease, Tenant shall carry or cause to be carried builder's risk insurance or an installation floater. Such property insurance shall be written on a full replacement cost basis (without deduction for depreciation).

Commercial General Liability insurance covering Landlord and Tenant against bodily injury liability, property damage liability and personal and advertising injury, including without limitation any liability arising out of the ownership, maintenance, repair, condition or operation of the Premises or adjoining ways, streets, parking lots or sidewalks. Such insurance policy or policies shall (i) contain no modification of the ISO standard definition of "Insured Contract," (ii) contain a "severability of interest" clause or endorsement which precludes the insurer from denying the claim of Tenant or Landlord because of the negligence or other acts of the other, (iii) be in amounts of not less than \$2,000,000 per occurrence for bodily injury and property damage and \$4,000,000 general aggregate, and (iv) be of form and substance reasonably satisfactory to Landlord. Such limits of insurance can be acquired through Commercial General liability and Umbrella liability policies.

Workers' Compensation and Employers Liability Insurance with statutorily mandated limits covering all persons employed by Tenant at the Premises in connection with any work done on or about the Premises for which claims for death or bodily injury could be asserted against Landlord, Tenant or the Premises.

Automobile Liability Insurance, including owned, non-owned and hired car liability insurance for combined limits of liability of \$2,000,000 per occurrence. The limits of liability can be provided in a combination of an automobile liability policy and an umbrella liability policy.

Insurance Provisions. All insurance policies shall:

- provide for a waiver of subrogation by the insurer as to claims against Landlord, its employees and agents with regard to Property Insurance and Workers' Compensation and Employers Liability Insurance;
- be primary and provide that any "other insurance" clause in the insurance policy shall exclude any policies of insurance maintained by Landlord and the insurance policy shall not be brought into contribution with insurance maintained by Landlord;
- contain deductibles not to exceed \$10,000.00;
- contain a standard noncontributory mortgagee clause or endorsement in favor of any lender designated by Landlord;
- provide that the policy of insurance shall not be terminated, cancelled or amended without at least thirty (30) days' prior written notice to Landlord and to any lender designated by Landlord covered by any standard mortgagee clause or endorsement, and shall not be terminated or cancelled due to nonpayment of premiums without at least ten (10) days' prior written notice to Landlord and to any lender designated by Landlord covered by any standard mortgagee clause or endorsement;
- be in amounts sufficient at all times to satisfy any coinsurance requirements thereof;
- except for Workers' Compensation Insurance referred to above, include Landlord, as an "additional insured" with respect to liability insurance;
- be evidenced by delivery to Landlord of an Acord Form 28 for property coverage and an Acord Form 25 for commercial general liability, Workers' Compensation and umbrella coverage provided that in the event that either such form is no longer available, such evidence of insurance shall be in a form reasonably satisfactory to Landlord
- be issued by insurance companies licensed to do business in the state where the Premises is located and which are rated no less than A-X by Best's Insurance Guide or are otherwise approved by Landlord.

Waiver of Subrogation.

Waiver of subrogation rights endorsements to all property insurance policies and Workers' Compensation and Employers Liability insurance policies carried in connection with the Premises, the contents of same or Tenant's use and/or operation of the Premises including the conduct of its business thereon or therein.