

RENTAL APPLICATION

Please Print

Date: _____

Property Address: _____

General Information

Company Name: _____

Company Address: _____

Number of Years in Business: _____

Type(Sole proprietorship, corporation, partnership, limited liability or etc.): _____

Number of Employees: _____ Federal Id.#: _____

Intended use of premises: _____

Owner(s) or Partner(s): _____

Social Security Number: _____ Date of Birth: _____

Owner's Residence Address: _____

Phone Number: _____

In case of an emergency notify: _____

Relationship: _____ Phone Number: _____

Present Landlord's Name: _____

Address: _____

Telephone Number: _____

Former Landlord's Name: _____

Address: _____

Telephone Number: _____

Trade References

Name	Address	City	State	Zip	Phone
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Contact Person

Name	Address	City	State	Zip	Phone
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Contact Person

Name	Address	City	State	Zip	Phone
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Contact Person

Bank References

Name	Address	City	State	Zip	Phone
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Contact Person

Name	Address	City	State	Zip	Phone
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Contact Person

Name	Address	City	State	Zip	Phone
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Contact Person

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EMPLOYMENT - COMPLETE THIS SECTION ONLY IF NEW BUSINESS

Employer: _____ Position: _____

Income: _____ Per: _____ Length of Service: _____

Supervisor's name: _____ Supervisor's Title: _____

Telephone Number: _____

Spouse's Employer: _____ Position: _____

Income: _____ Per: _____ Length of Service: _____

Supervisor's Name: _____ Supervisor's Title: _____

Telephone Number: _____

I/we hereby authorize Owner and/or its agents, to obtain credit information from sources as it chooses including, without limitation, credit bureaus, employers and references listed above.

I/we agree that if any information given herein by me/us is false, the lease, or any extensions thereof, made on the strength of this application may, at the option of the Owner, be terminated at any time.

PLEASE ATTACH THE LAST TWO (2) YEARS FINANCIAL STATEMENTS OR FEDERAL TAX RETURNS.

Applicant's Signature

Date

Applicant's Signature

Date

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Please return completed application to: Tata Incorporated
1941 Williams Road, Suite 3A
Columbus, Ohio 43207
Phone No.: 614-491-8036
Fax No.: 614-491-0338
Email: tatainci@att.net

Application fee: \$50.00