

# COMMERCIAL APPLICATION INFORMATION

Unit: \_\_\_\_\_

**Name:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Your Social Security # \_\_\_\_\_ Business TIN # \_\_\_\_\_

Current Phone Numbers: Ho:(\_\_\_\_\_) \_\_\_\_\_ Wk:(\_\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell:(\_\_\_\_\_) \_\_\_\_\_

**Name of Business/Profession Which Will Occupy Unit:** \_\_\_\_\_ How Long In Business? \_\_\_\_\_

---

**Current Business Address-Street:** \_\_\_\_\_ How Long? \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Landlord-Name: \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

Why Are You Moving? \_\_\_\_\_ Current Rent:\$ \_\_\_\_\_

---

**Previous Business Address-Street:** \_\_\_\_\_ How Long? \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Landlord-Name: \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

Why Did You Move? \_\_\_\_\_ Previous Rent: \$ \_\_\_\_\_

---

**Home Address:** \_\_\_\_\_ How Long? \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Own Monthly Mortgage Payments? \$ \_\_\_\_\_

Rent Monthly Rent? \$ \_\_\_\_\_ (Complete Landlord Information Below)

Landlord-Name: \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

(OVER)



**Office Use Only:** Rent: \_\_\_\_\_ Sec. Dep. \_\_\_\_\_ App. Dep. \_\_\_\_\_

**INCOME INFORMATION:**

Business Average Gross Monthly Income: \$ \_\_\_\_\_ Annual Gross \$ \_\_\_\_\_

Average Net Income After Expenses,  
Loan and other Payments: \$ \_\_\_\_\_ Annual Net \$ \_\_\_\_\_

Is the "Net Income" Above Calculated Before  Or After  Your Salary or Draw Annual Amount: \$ \_\_\_\_\_

Other Income: \_\_\_\_\_ Source: \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR MOST CURRENT INCOME TAX RETURN OR A FINANCIAL STATEMENT PREPARED BY A CPA**

**Your Bank:** \_\_\_\_\_ Type of Account: \_\_\_\_\_

Credit Cards: \_\_\_\_\_ Account Number: \_\_\_\_\_

\_\_\_\_\_ Number: \_\_\_\_\_

**Driver's License #** \_\_\_\_\_

Auto Type: \_\_\_\_\_ Year: \_\_\_\_\_ License # \_\_\_\_\_

**IN CASE OF EMERGENCY, NOTIFY:** \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address-Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**DO YOU EXPECT ANY CHANGE IN YOUR BUSINESS OR INCOME?** \_\_\_\_\_

It is hereby agreed and understood that willfully giving false information on this form is grounds for immediate eviction. By my signature hereon, I hereby authorize the release of information regarding my employment, banking, and/or credit ratings to Bartlein & Company, Inc. I understand that a credit report will be obtained from Trans Union Corp., P.O. Box 390, Springfield, PA 19064 Phone: (714) 680-7292 and that I may obtain a copy of my credit information directly from them.

\_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature

Commercial Application Information.Docx 6/19