

COMMERCIAL LEASE APPLICATION

Please provide all of the information requested below. Incomplete information can delay the processing of your application. ****PLEASE PRINT CLEARLY and include a copy of your ID.****



OCCUPANT(S)

Company _____

Address (Main Office) _____

Number Street City State Zip

DBA _____ Sole Prop Partnership Corp.

Corp. No. _____ Year Established _____

Employer ID# _____ Number of Employees _____

Type of Business _____

Gross Annual Revenue _____

Contact Person _____ Title _____

Phone # (_____) Fax # (_____)

COMMERCIAL RENTAL HISTORY (No Less Than Two Years)

Present Address _____

Number Street City State Zip

Rent _____ Own _____ Rental/Mortgage Amount Paid Monthly _____ From/To _____

Reason for _____ leaving _____

_____ Landlord Name/Mortgage Co. _____

_____ Phone # (_____) _____

Previous Address _____

Number Street City State Zip

Rent _____ Own _____ Rental/Mortgage Amount Paid Monthly _____ From/To _____

Reason for _____ leaving _____

_____ Landlord Name/Mortgage Co. _____

_____ Phone # (_____) _____

BANKING REFERENCE

Name _____ Phone # (_____) _____

Address _____

Number Street City State Zip

Account # _____ Checking _____ Savings _____ Balance _____

OTHER INFORMATION

THE PRINCIPALS

1) _____ Title _____

Last First Middle

Social Security # _____ Date of Birth _____

Address _____

Number Street City State Zip

OTHER INFORMATION (continued)

THE PRINCIPALS

2) _____ Title _____
Last First Middle
Social Security # _____ Date of Birth _____

Address _____
Number Street City State Zip

3) _____ Title _____
Last First Middle
Social Security # _____ Date of Birth _____

Address _____
Number Street City State Zip

CREDIT REFERENCES

1) Company _____ Phone # (_____)
Address _____
Number Street City State Zip
Account # _____ Contact Person _____

2) Company _____ Phone # (_____)
Address _____
Number Street City State Zip
Account # _____ Contact Person _____

3) Company _____ Phone # (_____)
Address _____
Number Street City State Zip
Account # _____ Contact Person _____

AUTHORIZATION

Old Peachtree Properties or any firm acting on its behalf is hereby granted permission to perform a credit check on our company and/or its principals.

1) SIGNATURE: _____ DATE _____
By _____ TITLE _____
2) SIGNATURE: _____ DATE _____
By _____ TITLE _____
3) SIGNATURE: _____ DATE _____
By _____ TITLE _____

Old Peachtree Properties LLC
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*****Application Fee is \$25*****