

COMMERCIAL LEASE APPLICATION

How did you hear about our properties?

- AikensGroup.com
 For Lease Sign
 Realtor
 Co-Star
 LoopNet
 Friend
 Brochure/Flyer
 Other: _____

Complete Legal Name to Appear on Lease: _____

Corporation
 LLC
 Partnership
 Sole Proprietor:
 Non-Profit

Other (explain): _____ State in Which Entity Formed: _____

Year Formed: _____ Federal Tax Payer ID Number: _____

D/B/A to Appear on Lease: _____

Main Address or Home Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____

Address for Notices & Billing: _____

City: _____ State: _____ Zip: _____

Current Business Name (If Differs from Legal Name for This Application: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____ Yrs. In Business _____

Description of Business:

Name of Person(s) Who Will Sign Lease:

Person 1: _____ Title: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State of Issuance: _____

Single Married Spouse's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____

Ownership Percentage: _____

Person 2: _____ Title: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ State of Issuance: _____
Single Married Spouse's Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Mobile Phone: _____ Fax: _____
Ownership Percentage: _____

Other Business Locations:

Location 1: _____
Street Address: _____
City: _____ State: _____ Zip: _____

Location 2: _____
Street Address: _____
City: _____ State: _____ Zip: _____

Name of Person(s) Who Will Guarantee Lease:

Person 1: _____ Title: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ State of Issuance: _____
Single Married Spouse's Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Mobile Phone: _____ Fax: _____

Person 2: _____ Title: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ State of Issuance: _____
Single Married Spouse's Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Mobile Phone: _____ Fax: _____

Credit References (Business/Personal):

Name: _____ Business Personal
Street Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Phone: _____

Name: _____ Business Personal
Street Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Phone: _____

Name: _____ Business Personal
Street Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Phone: _____

Name: _____ Business Personal
Street Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Phone: _____

Bank References (Checking/Savings Accounts):

Name: _____ Account Type: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Account Number: _____

Name: _____ Account Type: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Account Number: _____

Lessor

Lessor: _____ Date: _____
Property Address: _____
Square Feet (SF): _____ Property Name: _____



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AikensGroup.com

Conditions and Information

The completion of this application by Applicant(s) (“Tenant”) and the acceptance of this application by Creditor (“Landlord”) creates no obligation of Landlord to approve the application or enter into a Lease with the Tenant.

This application is to be used for the purpose of establishing Applicant’s current and past credit position and financial credibility and is for the use and review only by those owner(s) and representative(s) of the property Applicant is interested in leasing.

The confidentiality of the information being furnished by Applicant will be preserved except where disclosure of this information is required by applicable law or for the purposes of evaluating this proposed transaction.

I/We the undersigned hereby authorize Aikens Group, and/or any of its affiliates, partners, subsidiaries, employees or designees (hereinafter collectively referred to as Aikens Group), to make any credit inquiries that they deem necessary in connection with my/our lease application. This authorization also applies to inquires regarding employment history, bank accounts, and follow-up credit inquires/checks that Aikens Group may deem necessary now or in the future, in connection with the tenancy contemplated.

Applicant

Printed Name: _____
Signature: _____
Date: _____
Street Address: _____
City: _____
State/Zip: _____
Date of Birth: _____
Drivers License
Number: _____
Social Security: _____

Spouse (if Applicable)

Printed Name: _____
Signature: _____
Date: _____
Street Address: _____
City: _____
State/Zip: _____
Date of Birth: _____
Driver’s License
Number: _____
Social Security: _____

Applicant Screening Fee: \$50.00

The Screening Fee is non-refundable. The application will not be processed without receipt of the Screening Fee.

Paid: _____

Date: _____