

BUY | SELL | PROPERTY MANAGEMENT

Commercial Application Guidelines

[Please use as checklist, for proper application completion]

Each adult (18+) must complete and sign an application

			· ·
	Date	Leasing Specialist	Date
LAPP	lication process takes 48-72 hours to		envered to office;
ГА	be reached)	a muccoss ansa full annlication is A	alivered to office
		iving a call, as it can hold up the pr	ocess if they carmot
		lease inform all the references for Jo	
	All utilities are paid for and up to		-1-/Danta1/T
	No prior evictions on your record.		
	You must make 2.2(net) times mor		
Qua	ifications for Rent		
	place your information into as wel	ц .	
	-	aturdays there is an after-hour's ma	in stot you can
		rthur Blvd. Oakland, CA 94602. Of	
_	(Personal credit reports from other		fice hours are from
		c. We take this in order to run the cr	reait check.
		Cashier's Check or Money Order. I	
		lication fee for each applicant who	
	11 1 -	otocopy of a government issued ide	
	much financial support you receiv		
	with application. If you have other	r sources of income you must provi	de proof of how
	after taxes).Current Bank Statemer	nts or Tax forms for the last year mu	ast be submitted
	Provide proof of income for the bu	isiness. The Business must prove th	lat It makes 2.2(fict,

color, religion, sex, sexual orientation, handicap, familial status, or national origin.



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RECEIPT FOR TENANT SCREENING

&

CREDIT CHECK FEES

On	, Owner/Agent received \$	from the undersigned,
hereinafter ca	alled "Applicant," who offers to rent from	n Owner/Agent the premises
Address:	·	Unit # (if applicable)
City:	, CA Zip:	
Date of desire	ed move in:	
Applicant au	thorizes verification of information supp	lied by Applicant via methods
which may ir	nclude, but are not limited to, tenant scre	ening and credit checking.
Applicant: <u>X</u>	<u> </u>	Date:
Agent: X	·	Date:
	PLEASE TAPE CREDIT CHECK F	EE IN THIS BOX.
	(office use only)	

COMMERCIAL LEASE APPLICATIONPlease provide all of the information requested below. Incomplete information can delay the processing of your application. PLEASE PRINT CLEARLY.

OCCUPANT(S) Company						
Address (Main Office) _						
	Number	Street	City		State	Zip —
DBA		· ·	🗆 s	Sole Prop	☐ Partnership	☐ Corp.
Corp. No			Year Est	ablished	 	
Employer ID#			Number	of Employees	· · · · · · · · · · · · · · · · · · ·	
Type of Business			·			
Gross Annual Reveilue				<u>.</u>		
Contact Person					Title	
Phone # <u>()</u>				Fax #()	
COMMERCIAL R	ENTAL	HISTORY (No Less	Than Two Years)			
		Street		City	State	Zĺp
KentOwn	t and love	_ Rental/Mortgage Amo	unt Paid Monthly		State From/To	
Reason for leaving		in .	 ·			
Landlord Name/Mortgag	ge Co	·			Phone # ()	
	Number	Street Rental/Mortgage Amo			State From/To	Zip
Landlord Name/Mortgag	ge Co				Phone # ()	·
BANKING REFER	************			***************************************		
Name			I	Phone #()	
Address					- Contract	
Number		Street	City		State	Zip
					Balance	
OTHER INFORM						•••••
THE PRINCIPALS						
1)		First	Middle	Title		··· ···
Toot			MITTURE			
Last			Date of B	irth		
Last			Date of B	irth)

2) Last	First	Middle	Title	
Social Security #		Date of Birth_	<u> </u>	
AddressNumber	Street	City	State	Zip
*			Title	-
3)Last	First	Middle		
Social Security #		Date of Birth _		
Address				
Number	Street	City	State	Zip
CREDIT REFERENC		***************************************		
1) Company		Phone	e#()	· · · · · · · · · · · · · · · · · · ·
AddressNumber				
Number	Street	City	State	Ziþ
Account #		Contact Persor	n	
2) Company		Phone	e#()	
		City		
AddressNumber			State	Zipi
Account #		Contact Persor	n	
0) G		Dham	· · · · ·	
		Phone	e#(<u> </u>	
AddressNumber	Street	City	State	Zip
Account #		Contact Persor	n	
AUTHORIZATION	***************************************	***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •
	Compretion or any firm act	ing on its behalf is hereby grante	od nermission to nerform a	credit check on our con
pany and/or its principals.	corporation of any min act	ing on its bolian is hereby grante	a permission to perform a	ordan ondok on our oon
			DATE	
1) SIGNATURE:				
1) SIGNATURE:By			TITLE	
1) SIGNATURE: By 2) SIGNATURE:			TITLEDATE	
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By	NLY it to authorize banks, landlo	rds, and credit references to relea	TITLE DATE TITLE DATE TITLE TITLE	n to Contemporary

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OTHER INFORMATION (continued)

Not Accepted: Reason____