



# Commercial Lease Application

Please provide all of the information requested below. Incomplete information can delay the processing of your application. **PLEASE PRINT CLEARLY** and submit with a Business Credit Report or a Dun and Bradstreet Report. E-mail application and supporting documents to [propertymgr@schillingcompanies.com](mailto:propertymgr@schillingcompanies.com)

## Occupant(s)

Company				
Address		City	State	Zip
DBA		Sole Prop <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/>		
Corp. No.		Year Established		
Employer ID#	# of Employees	Type of Business		
Gross Annual Revenue				
Corporate Contact Person		Local Contact Person		
Title	Phone	Title	Phone	
Email		Email		

## Commercial Rental History

<b>Present Address</b>		City	State	Zip
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	Rental/Mortgage \$/Mo.	From/To	
Landlord Name/Mortgage Co			Phone	
Reason for Leaving				
<b>Previous Address</b>		City	State	Zip
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	Rental/Mortgage \$/Mo.	From/To	
Landlord Name/Mortgage Co			Phone	
Reason for Leaving				

## Banking Reference

Name of Banking Institution			Phone	
Bank Officer Contact				
Address		City	State	Zip
Checking Account	Yes <input type="checkbox"/> No <input type="checkbox"/>	Account Number		Balance
Savings Account	Yes <input type="checkbox"/> No <input type="checkbox"/>	Account Number		Balance

# Other Information-The Principals

Last	First	Middle	Title	
Social Security #		Date of Birth		
Address		City	State	Zip

Last	First	Middle	Title	
Social Security #		Date of Birth		
Address		City	State	Zip

Last	First	Middle	Title	
Social Security #		Date of Birth		
Address		City	State	Zip

# Credit References

Company			Phone	
Address		City	State	Zip
Account #	Contact Person			

Company			Phone	
Address		City	State	Zip
Account #	Contact Person			

Company			Phone	
Address		State	Zip	
Account #	Contact Person			

Authorization - **Schilling Companies, LLC** or any firm acting on its behalf is hereby granted permission to perform a credit check on our company and/or its principals.

Signature		Date	
Print Name		Title	

Signature		Date	
Print Name		Title	

Signature		Date	
Print Name		Title	