

Lease Application & Information

COMPANY NAME: _____ Phone: _____
Business Address: _____ Zip Code: _____
Years in Business: _____ Years at Current Location: _____ Size of Current Premises: _____
Current Rent: _____ Number of Employees: _____ Present Lessor: _____
Phone: _____
ProposedUseofPremises: _____
Will any Hazardous Materials be Stored or used on the Premises? Yes ☐ No ☐ If yes, please attach list (i.e. MSDS sheets)

TYPE OF BUSINESS ORGANIZATION: (Complete Section A, B or C) [Please attach last two years' financial statements.]

A. SOLE PROPRIETORSHIP / INDIVIDUAL:
1. Owner's Name: _____ Phone: _____
Residence Address: _____ Zip Code: _____
Do you Own ☐ or Rent ☐ ? For How Long? _____ Date of Birth _____
Social Sec. No: _____ Driver's License No: _____

B. PARTNERSHIP:
1. Name: _____ Social Sec. No.: _____
Residence Address: _____
Phone: _____
2. Name: _____ Social Sec. No.: _____
Residence Address: _____
Phone: _____

C. CORPORATION: Federal Tax ID: _____ Date Incorporated: _____ State of Incorp.: _____
☐ Parent Corp.: _____ ☐ Division/Subsidiary of: _____
CORPORATE OFFICERS:
1. Name: _____ Title: _____
Residence Address: _____
Phone: _____
2. Name: _____ Title: _____
Residence Address: _____
Phone: _____

By signing below, you hereby declare that the representation of facts contained in the foregoing application are considered part of the lease and are true and correct. If any information herein contained is false, the lease made on the strength of this application may, at the option of the Landlord, be terminated at any time. By signing below, you authorize the Landlord and Its agents including Southern California Real Estate Services to verify the above statements including, but not limited to, individual credit information, now or any time during the lease term.

For corporate applicants, you hereby declare that you have been given authority by the Corporation listed above to represent the facts contained in the foregoing application, and that these facts are considered part of the lease and are true and correct. If any information contained is false, the lease made on strength of this application may, at the option of the Landlord, be terminated at any time. By signing below, you authorize the Landlord and Its agents including Southern California Real Estate Services, to verify the above statements including, but not limited to, business credit information, now or any time during the lease term.

Signature: _____ Date: _____
Print Name: _____ Title: _____

LEASE GUARANTOR INFORMATION: (If Applicable)

LEASE GUARANTOR: _____ Social Security No.: _____
Residence Address: _____
Driver's License No: _____ Date of Birth _____

By signing below, you hereby agree to be the guarantor of the lease between the Lessor and above applicant(s). Additionally, you hereby declare that the representation of facts contained in the foregoing application are considered part of the lease and are true and correct. If any information herein contained is false, the lease made on the strength of this application may, at the option of the Landlord, be terminated at any time. By signing below, you authorize the Lessor and Its agents including Southern California Real Estate Services to verify the above statements including, but not limited to, individual credit information, now or any time during the lease term.

Signature: _____ Print Name: _____ Date: _____

BANK REFERENCES:

Checking: _____ Branch: _____ Account No.: _____
Savings: _____ Branch: _____ Account No.: _____

CREDIT REFERENCES:	Account No.	Phone	Contact
1. _____			
2. _____			
3. _____			
4. _____			

NOTICE TO CONSUMER

(PLEASE COMPLETE THOROUGHLY, COMPLETELY, AND LEGIBLY AND SIGN BELOW)

Thank you for seeking a rental or leasing relationship with our company: **Southern California Real Estate Services and/or Lessor and Its Agents**

In compliance with State and Federal laws, we are hereby notifying you that a CONSUMER REPORT, and/or INVESTIGATIVE CONSUMER REPORT may be obtained for use in evaluating our decision to accept your personal guarantee for the rental or lease of our property, the extension of credit in the form of providing tenant improvements, pro-rated and 'financed' through the lease terms, and may be obtained for collection purposes, in the event of a default of any of the above.

Inquiries may be made in considering your application, and the ensuing report may contain public/semi-public or private information, identification information, credit information, or other information, which could adversely affect your potential for an association with us. The report will only be obtained, according to your written instruction(s), below.

You have the right to make a direct written request to obtain copies of any reports, which may have been provided by one, or more of the following Consumer Reporting Agencies, which may have contributed to the compilation of the Consumer Report, and/or Investigative Consumer Report:

1.

EXPERIAN (Formerly TRW – www.experian.com)
701 Experian Pkwy
Dallas, TX 75013; or call:
1-888-397-3742
2.

TRANSUNION (www.transunion.com)
2 Baldwin Place
Chester, PA 19022; or call:
1-800-916-8800
3.

EQUIFAX (www.equifax.com)
P.O. Box 740241
Atlanta, GA 30374-0241; or call
1-800-685-1111
4.

APSCREEN Consumer Relations
P.O. Box 1355
Newport Beach, CA 92663; or call
1-800-637-0223

AGREEMENT AND CONSENT

I have read this form completely, and I authorize you to obtain a Consumer Report or Investigative Consumer Report, per the outline of available information, above. **I also (by photocopy of this form) authorize Consumer Reporting Agencies,** related or unrelated firms, public, private, government, law enforcement and/or other agencies and/or persons to release information in response to these inquiries, and release same from any and all liability in responding to such inquiries. I also fully indemnify any and all of those associated with this consent against any and all direct, indirect, and/or consequential, or other damages which might arise in the course and process of the use of this consent. I understand that I am authorizing this request in accordance with my rights under the Fair Credit Reporting Act, the Fair and Accurate Credit Transactions Act, and the Gramm-Leach-Bliley Act.

Signed: _____ Date: _____
Full Name (Printed): _____
Social Security Number: _____ Date of Birth (mm/dd/yy): _____
Current Address: _____
City/State/Zip: _____
Telephone Number: _____