

Commercial Lease Application

Forget Properties

4214 Fleur Drive, Suite 13

Des Moines, IA 50321

515-223-0019

Please provide all of the information requested below.

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

Present Address _____

Number

Street

City

State

Zip

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

Reason for leaving _____

Commercial Rental History(Cont.)

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 _____

Tenant(s) Information

1) _____ Title _____

Last First Middle

Social Security # _____ Date of Birth _____

Address _____

Number Street City State Zip

2) _____ Title _____

Last First Middle

Social Security # _____ Date of Birth _____

Address _____

Number Street City State Zip

Tenant(s) Information(Cont.)

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

Forget Properties is hereby granted permission to perform a credit check on our company.

1) Signature: _____ Date _____

By _____ Title _____

2) Signature: _____ Date _____

By _____ Title _____

3) Signature: _____ Date _____

By _____ Title _____