



COMMERCIAL TENANT APPLICATION

PROPERTY: _____

NAME OF INDIVIDUAL APPLYING: _____

APPLICANT'S SOCIAL SECURITY NUMBER: _____

APPLICANT'S BIRTH DATE: _____

PRIMARY CONTACT #: _____

SECONDARY CONTACT #: _____

EMAIL ADDRESS: _____

APPLICANT'S HOME ADDRESS: _____

DRIVER'S LICENSE # AND STATE: _____

NAME OF BUSINESS ENTITY: _____

BUSINESS FEIN/TAX ID NUMBER: _____

BUSINESS WEBSITE ADDRESS: _____

NAME OF ALL PERSONS IN OWNERSHIP: _____

CURRENT BUSINESS ADDRESS: _____

CURRENT LANDLORD & TELEPHONE: _____

CURRENT EMPLOYER: _____

POSITION: _____

SALARY: _____

ADDITIONAL INCOME: _____

SOURCE: _____

Applicant Signature(s):

_____ Date

_____ Date

NOTICE AND AUTHORIZATION OF USE OF CONSUMER REPORTS FOR RENTAL PURPOSES

As a condition of renting with _____ a consumer report and/or investigative consumer report may be obtained for rental purposes when evaluating your eligibility for commercial renting.

I, _____, hereby authorize The Richden Companies to obtain a consumer report and/or investigative consumer report on myself for the purpose of evaluating my eligibility for rental purposes.

I understand that such reports may include information bearing upon my credit worthiness, credit standing, character, general reputation, personal characteristics, and/or more mode of living. I further acknowledge that such information may be obtained through personal interviews with any person who has knowledge of such information.

I understand that I have the right to request the complete and accurate disclosure of the nature and scope of any investigative consumer report performed, and hereby acknowledge receipt of the federal trade commission’s summary of consumer rights enclosed herein.

I authorize and request every person, firm, company, corporation, governmental agency, court, college university, school district, or other education institution, law enforcement office, and any other entity having control or possession of any information pertaining to me or my background to furnish same to any requesting party compiling information for the purpose indicated herein.

Applicant’s Signature: _____ Date: _____

Printed Name: _____

Social Security No: _____

Address: _____

Date of Birth: _____

Phone: _____