

# COMMERCIAL LEASE APPLICATION

## LANDLORD INFORMATION

### Landlord

Landlord's Name: KELA Properties

Landlord's Address: 10132-A Hull Street Rd. Midlothian, VA 23112

Landlord's Phone: (804) 349-8655

### Property Information

- All monetary values are expressed in US Dollars.
- Rental Property Address: 10132 Hull Street Rd. Midlothian, VA 23112.
- Application to rent suite/bay #: Suite D.
- Tenant's leased area: 1,250.00 square feet.
- Anticipated Possession Date: October 1, 2022.
- The term of the tenancy will be until the 30th day of September, 2023.
- The base rent will be: \$1,450.00.
- The initial security deposit will be: \$500.00.
- Utilities: Internet & Electric to be paid for by the tenant
- The advance rent required will be equivalent to the first month's rent.
- Insurance required naming Lessor as additional insured with a minimum of \$100,000 damage premises rented and \$1,000,000 liability coverage.

*\*Full lease terms subject to signed and agreed upon terms\**

## TENANT INFORMATION

*Please fill out the following information to the best of your ability and where applicable.*

### Business Information

Business Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Intended Use of Premises:

\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Check One: \_\_\_\_\_ Sole Proprietor \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation

Type of Business: \_\_\_\_\_Retail \_\_\_\_\_Wholesale \_\_\_\_\_Manufacturer \_\_\_\_\_Services  
\_\_\_\_\_Other \_\_\_\_\_

**Business Name:** \_\_\_\_\_

Present Address: \_\_\_\_\_

Date Established: \_\_\_\_\_Number of Employees: \_\_\_\_\_

Parent Company Name (if applicable): \_\_\_\_\_

Parent Company Address: \_\_\_\_\_

How long at present address: \_\_\_\_\_Monthly Payment: \_\_\_\_\_

Present Landlord Name: \_\_\_\_\_

Present Landlord Address: \_\_\_\_\_

Present Landlord Phone: (\_\_\_\_\_) \_\_\_\_\_

How long at previous address: \_\_\_\_\_Monthly Payment: \_\_\_\_\_

Previous Landlord Name: \_\_\_\_\_

Previous Landlord Address: \_\_\_\_\_

Previous Landlord Phone: (\_\_\_\_\_) \_\_\_\_\_

**Business Owner / Partner / Stockholder Information**

**First Owner's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

**Second Owner's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

**Third Owner's Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

**Banking Information**

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

*(If you bank with more than one institution, please list second bank below)*

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Credit References**

*List industry references from which you make purchases through credit accounts.*

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Have you ever committed a felony of the first degree, a capital felony, a felony involving money laundering, fraud, or embezzlement? \_\_\_\_\_(YES/NO)

Credit & Criminal Background Check Authorization

I certify that the information provided is true, accurate and complete. I hereby authorize an investigative consumer report including, but not limited to, criminal history records, court records and credit records to assess the applicant's suitability as a tenant/lessee. **This authorization must be signed before it can be processed.** Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application or termination of the right to occupancy.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_