

LEASE APPLICATION

CREDIT INFORMATION

PLEASE PRINT OR TYPE

Tenant Name (Complete Legal Name)			DBA Name (if any)		
Current Business Address		City	State (Abrv)	Zip Code	Phone
Type of Business/Product	How Long in Business	Date Present Ownership Began		Ever Filed Bankruptcy? NO YES YEAR:	
IF PARTNERSHIP, SOLE OWNERSHIP, OR PERSONAL GUARANTEE					
Owner/Partner Name		Social Security No.		Date of Birth	
Home Street Address Rent Own		City	State/Zip	Home Phone	
Owner/Partner Name		Social Security No.		Date of Birth	
Home Street Address Rent Own		City	State/Zip	Home Phone	
If Incorporated, State where Incorporated		Date Incorporated			
Officer Name	Title	Home Address, City St., Zip		Home Phone	Years with Co
Officer Name	Title	Home Address, City St., Zip		Home Phone	Years with Co
IF IN BUSINESS LESS THAN ONE YEAR, PLEASE COMPLETE THE FOLLOWING					
Name of Previous Business, if any		Address, City, State, Zip			
Name of Previous Business, if any		Address, City, State, Zip			
TRADE REFERENCES					
Name	Address, City, State, Zip			Phone	
1.				()	
2.				()	
3.				()	
Current Landlord	Address, City, State, Zip			May we contact for reference? ()	
BANK REFERENCES					
Bank Name	Type of Account	Account Number	Telephone	Bank Officer's Name	
CONSENT					
<p>I AGREE TO ALLOW MY CREDIT HISTORY TO BE PROCURED AND REVIEWED BY THE SEELEY COMPANY AND/OR OWNER-LANDLORD AND THEREFORE RELEASE ANY AND ALL PERSONS FROM ALL LIABILITY IN CONNECTION WITH RESPONDING INQUIRIES REGARDING THIS CONSENT. I ALSO UNDERSTAND THAT ANY INACCURATE INFORMATION CONTAINED IN MY REPORT SHALL NOT BE THE RESPONSIBILITY OF THE REQUESTER, OR THE PROVIDER, OR ANY OF ITS AFFILIATES OR CORRESPONDENTS. THE REPRESENTATIONS OF FACT CONTAINED IN THIS APPLICATION ARE CONSIDERED PART OF THE LEASE AND ARE TRUE AND CORRECT. IF ANY INFORMATION HEREIN CONTAINED IS DISCOVERED TO BE FALSE OR MISLEADING, THE LEASE MADE ON THE STRENGTH OF THIS APPLICATION MAY, AT THE OPTION OF THE LANDLORD, BE TERMINATED AT ANY TIME.</p>					
SIGNATURE				DATE	
PRINTED NAME					
PLEASE CHECK HERE IF FINANCIAL STATEMENTS OR ADDITIONAL CREDIT INFORMATION ATTACHED.					

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FOR OFFICE USE ONLY

Co# _____ Contact Name _____ Contact Telephone No. _____

Fax Back No. _____

Credit Requested: *Super Package _____ TRW only _____ CBI only _____
 TransUnion only _____ Legal Data _____ Other _____

*Contains all of the above