

Utica Executive Suites, LLC

Confidential Lease Application

Return to: Michael Bailey
8608 Utica Avenue, Suite 200
Rancho Cucamonga, CA 91730

Phone: (909) 945-2727
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PLEASE TELL US ABOUT YOUR COMPANY

Company Name:

Current Business Address: Street Number: City: State: Zip:

Phone: Other Phone: Fax:

Website:

DBA: Type:

Corp Number: Year Established:

Employer's ID Number: Number of Employees:

Type of Business:

Gross Annual Income:

Contact Person: Title:

Phone Number: Ext: Email:

COMMERCIAL RENTAL HISTORY

Previous Business Address: Street Number: City: State: Zip:

Please Choose One: Rental/Mortgage Paid Monthly: From: (MM/YY) TO: (MM/YY)

Reason for Leaving:

Landlord/Mortgage Company: Phone Number:

Previous Business Address: Street Number: City: State: Zip:

Please Choose One: Rental/Mortgage Paid Monthly: From: (MM/YY) TO: (MM/YY)

Reason for Leaving:

Landlord/Mortgage Company: Phone Number:

BANKING REFERENCE

Name:

Address: Street Number: City: State: Zip:

Phone Number: Account Number: Type:

Name:

Address: Street Number: City: State: Zip:

Phone Number: Account Number: Type:

CREDIT REFERENCE

Name:

Phone Number:

Address: Street Number: City: State: Zip:

Account Number: Type:

Contact Person: Title:

Name:

Phone Number:

Address: Street Number: City: State: Zip:

Account Number: Type:

Contact Person: Title:

Utica Executive Suites, LLC

BUSINESS/PERSONAL REFERENCE

Name: _____ Phone Number: _____
Address: Street Number: _____ City: _____ State: _____ Zip: _____
Type: _____ Is it okay to contact this person? _____
Name: _____ Phone Number: _____
Address: Street Number: _____ City: _____ State: _____ Zip: _____
Type: _____ Is it okay to contact this person? _____

THE PRINCIPALS

1) First Name: _____ Last Name: _____ Middle Initial: _____
Social Security Number: _____ Date of Birth (MM/DD/YYYY) _____
Driver's License Number: _____ State Issues: _____
Address: Street Number: _____ City: _____ State: _____ Zip: _____
Work Number: _____ Cell Number: _____ Email: _____
2) First Name: _____ Last Name: _____ Middle Initial: _____
Social Security Number: _____ Date of Birth (MM/DD/YYYY) _____
Driver's License Number: _____ State Issues: _____
Address: _____ City: _____ State: _____ Zip: _____
Work Number: _____ Cell Number: _____ Email: _____
3) First Name: _____ Last Name: _____ Middle Initial: _____
Social Security Number: _____ Date of Birth (MM/DD/YYYY) _____
Driver's License Number: _____ State Issues: _____
Address: Street Number: _____ City: _____ State: _____ Zip: _____
Work Number: _____ Cell Number: _____ Email: _____
4) First Name: _____ Last Name: _____ Middle Initial: _____
Social Security Number: _____ Date of Birth (MM/DD/YYYY) _____
Driver's License Number: _____ State Issues: _____
Address: Street Number: _____ City: _____ State: _____ Zip: _____
Work Number: _____ Cell Number: _____ Email: _____

PLEASE DESCRIBE THE COMPANY'S CREDIT HISTORY

Declared bankruptcy in the past seven (7) years?
Been evicted from a rental residence?
Had two or more late rental payments in the past year?
Ever willfully or intentionally refused to pay rent when due?
If yes, please explain in the space below:

Utica Executive Suites, LLC

ADDITIONAL INFORMATION

Please give any additional information that might help owner/management evaluate this application?

I hereby apply to lease, from Utica Executive Suites, for the term and upon the set conditions above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application. I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I recognize that as a part of your procedure for processing my application, and investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. The above information, to the best of my knowledge, is true and correct.

AUTHORIZATION

To be signed by each Principal

1) Print Name: _____ Title: _____

Signature: _____ Date: _____

2) Print Name: _____ Title: _____

Signature: _____ Date: _____

3) Print Name: _____ Title: _____

Signature: _____ Date: _____

4) Print Name: _____ Title: _____

Signature: _____ Date: _____