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Commercial Rental Application

Applications must be completed by each principal of each business or entity that would be operating, to any extent, in the location for which you are applying.

I declare all information provided below is true and actuate. I agree that the Landlord may terminate any agreement entered into in reliance on any false information below. Permission is hereby granted to Landlord to obtain a credit report and criminal report. Permission is also granted to the Landlord and credit bureau to verify any information obtained from any source named herein. I hereby authorize any present or former landlord to provide any information they may have regarding me in their capacity as landlord. Furthermore, I hereby release said landlords, landlords' company or representatives from any and all liability for any damage whatsoever caused for issuing said information.

Name: (first, middle, last):	
Signature:	Today's Date:/
Property you are applying for:	Desired move-in date//
Individual's Information Date of birth://	Social Security Number:/
Home Phone:	Cell Phone
Work Phone:	Email:
Driver licenses number:	State issued:
Emergency contact 1:	Phone:
Emergency contact 2:	Phone:
Current home address:	City:
State: Zip Code: You: _	Own,Rent Monthly rent/mortgage:
refused to pay rent? (Yes / No). Ever been	e taxes: \$ Have you ever been evicted or a arrested, or charged for, or convicted of a crime? the nature of the offense, when committed and
Used any other name: (Yes / No). If yes, list	t name(s):

A registered or unregistered sex offender? (Yes / No). Currently use any illegal drugs? (Yes / No). Has there been a home foreclosure on which was in your name within the past two years? (Yes / No) Have you previously or are you currently filing for bankruptcy: (Yes / No). If yes, when did you file or are you planning to file?/		
Company's Information Company name:	Type of business:	
Name of company owner(s):		
Tax I.D. Number:Num	ber of years company has been in operation:	
Total number of employees: Number	of employees that will be working out of the	
space for which you are applying: Co	ompany's net income: \$ per (month /	
year). Company's gross income: \$p	per (month / year). Will any secondary	
companies be operating out of the same space?	(Yes / No). If yes, list the additional company	
names:		
Current business address:	City:	
State: Zip Code: Move-in date:	_// Move out date / lease expiration	
date:/ Will you be vacating this current business address? (Yes / No) If yes,		
have you given notice to vacate? (Yes / No) M	onthly rent \$ Reason for moving /	
vacating:		
Landlord name:	Landlord phone number:	
Previous business address:	City:	
State: Zip Code: Monthly rent	/mortgage: \$	
Move-in date:/ Move out date	lease expiration date:/	
Landlord name:	Landlord phone number:	
Did you give notice to vacate? (Yes / No) Reas	son for vacating:	