

Jackbilt LA, Inc.

1819 West Olive Avenue | Burbank | California | 91506 | Phone: (818) 843-7850 | Fax: (818) 842-2127

Applications may be submitted to Denise at: dcanino@jackbilt.com

COMMERCIAL APPLICATION FOR RENT OR LEASE

PART I: Lessee Information (Please type or print clearly)

- A. Business Name:** _____
DBA: _____ Phone: _____
Address: _____ City: _____ State: ____ Zip: _____
Primary Email: _____ Secondary Email: _____
- B. Legal Entity:** Individual Corporation Sole Proprietor Partnership

PART II: Office / Partner / Owner Information

Full Name	Position	SSN	Driver's License
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Full Home Address _____

Home Phone	Mobile Phone	Email Address	DOB
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Full Name	Position	SSN	Driver's License
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Full Home Address _____

Home Phone	Mobile Phone	Email Address	DOB
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Full Name	Position	SSN	Driver's License
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Full Home Address _____

Home Phone	Mobile Phone	Email Address	DOB
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A: State Incorporated: _____ B: Date Business Established: _____

C: Federal Tax I.D. #: _____ D: Is Corporation publicly or privately held? Public Private

E: Nature of Business: _____

F: On what exchange, if any, is Corporation listed? _____

G: Who is authorized to execute this Lease? _____

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PART III: Parent Company

Name of Parent Company: _____

Address of Parent Company: _____

PART IV: Business Address

A. Current Address: _____

Lessor Name: _____ Contact Name: _____

Lessor Phone: _____ Length of Occupancy: _____

Square Footage Occupied: _____ Monthly Lease Amount: _____

B. Prior Address: _____

Lessor Name: _____ Contact Name: _____

Lessor Phone: _____ Length of Occupancy: _____

Square Footage Occupied: _____ Monthly Lease Amount: _____

C. Prior Address: _____

Lessor Name: _____ Contact Name: _____

Lessor Phone: _____ Length of Occupancy: _____

Square Footage Occupied: _____ Monthly Lease Amount: _____

PART V: Major Creditor or Trade References

A. Business / Personal Credit Accounts

Name: _____ Phone: _____ Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: _____ Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: _____ Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

B. Business / Personal Bank Accounts

Bank Name: _____ Phone: _____ Contact: _____

Address: _____ Acct #: _____

Bank Name: _____ Phone: _____ Contact: _____

Address: _____ Acct #: _____

Bank Name: _____ Phone: _____ Contact: _____

Address: _____ Acct #: _____

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PART VI: Business Declarations

- A. Has this business, its officers, partners, or owners ever been delinquent in payment of any financial obligations? (If yes, please explain) Yes No
- B. Has this business, its officers, partners, or owners ever been a defendant in an unlawful detainer and/or breach of contract lawsuit? (If yes, please explain) Yes No

The undersigned applicant hereby declares that he/she is authorized to make the representations of fact contained in the foregoing application and that the representations of fact contained in the foregoing application are true and correct. Applicant understands that Lessor is relying on the truth of facts contained in the application in determining whether to enter into a Lease with Applicant. If any information herein is false, Applicant will be liable to Lessor for all damages arising there from. The Lease made on the strength of this application may, at the option of Lessor, be terminated at any time, if Lessor learns that any information herein contained is false.

Applicant authorizes _____ on behalf of Lessor to verify the above statements, including, but not limited to the use of credit information agencies.

Signature of Applicant: _____ Title: _____ Date: _____