

COMMERCIAL LEASE APPLICATION

Landlord/Lessor: _____ Date of Application: _____
Location of Leased Premises: _____

Business Name: _____
Name of Persons who will sign lease:
Person 1: _____
Driver's License No. _____ State of Issuance: _____
Social Security Number: _____ Date of Birth: _____

Person 1 Contact Information:

Street Number and Name

City, State and Zip

Email

Phone

Is your business a corporation, LLC or other entity? Yes No
- If yes, what form of business entity? _____
- Federal Tax ID Number: _____
- State in which entity formed? _____
- Names of Person(s) who will Guarantee Lease
- Person 1: _____
- Registered Agent Name: _____
- Address for registered agent: _____
City State Zip _____
Proposed use of premises? _____

Other Business Locations: _____

Credit References: _____
Name: _____
Address: _____
City State Zip _____
Contact: _____ Phone: _____
Name: _____
Address: _____
City State Zip _____
Contact: _____ Phone: _____



Real Investments
115 Los Altos Street
Channel Islands Harbor, CA. 93035

805-985-1000 Office
805-985-3322 Fax

For Landlord's Use Only
Rent Amount: _____
Deposit: _____
Date Lease to begin: _____
End of Lease: _____

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By your signature hereon, you agree that the information disclosed by you herein is true, complete and accurate to the best of your knowledge, and you agree that the information disclosed by you herein is material to the potential Lessor's decision with respect to granting or denying your application to enter into a lease.

Signed: _____ Date: _____

The completing of this application by Tenant and the acceptance of this application by the Landlord creates no obligation of Landlord to approve the application. If this application is approved, Tenant must deliver the security deposit and sign the lease before the tenancy begins.

Credit References Continued:

Name: _____
 Address: _____
 City State Zip _____
 Contact: _____ Phone: _____

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 Oxnard, California 93035
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www.realinvestments.com

Bank Information

Name	Type Of Account	Account#	City
_____	_____	_____	_____
_____	_____	_____	_____

Credit Cards

Type	Card#	Type	Card #
_____	_____	_____	_____

Creditors (Not Already listed)

Name	Monthly Payment	Balance Owed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DISCLOSURE OF MANAGER:

The Manager of the Premises is _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Comments:

CONSENT TO CREDIT CHECK

I/We, _____ 'the undersigned applicant(s) authorize landlord, _____ or his/her/their agent to order and review my/our credit and criminal history and investigate the accuracy of the information contained in the application. I/We further authorize all banks, employers, creditors, credit card companies, references, and any and all other persons to provide to Landlord any and all information concerning my/our credit.

Signed: _____ Date: _____

Signed: _____ Date: _____

Note: Fee for credit check is \$25.00 per person

REAL INVESTMENTS

Entity Requirements to Support Lease Application

Please provide the following supporting documents with your lease application for proper Consideration and qualifying:

Corporation or LLC

1. lease Application with Financial Statement
2. Authorization to run Credit and a copy of driver's license for each lease guarantor(s). Provide \$25.00 per application to run credit
3. Financial Statements (current)
4. Income Tax Returns (last 2 years)
5. Proof of FEIN or EIN number
6. Articles of Incorporation,if the corporation has been formed within the last 0-12 months
7. list of Board of Directors,Officers and Managers

Individual or Sole Proprietorship

1. Lease Application with Financial Statement
2. Authorization to run Credit with a copy of a driver's license
3. Bank Statements (last 3 months)
4. Income Tax Returns (last 2 Years)
5. Signature Block(s) with name(s) and position(s) of lease guarantor(S)