



## CREDIT AND BACKGROUND INFORMATION

### BUSINESS INFORMATION

FULL LEGAL COMPANY NAME: \_\_\_\_\_  
 Business License #: \_\_\_\_\_ City: \_\_\_\_\_  
 DBA: \_\_\_\_\_  
 Federal Employ. ID#: \_\_\_\_\_ Date Fictitious Bus. Name filed: \_\_\_\_\_  
 Bus. Address: \_\_\_\_\_  
 Tel#: \_\_\_\_\_  
 Years in this Location: \_\_\_\_ # of Stores: \_\_\_\_ Where: \_\_\_\_\_  
 If a Corporation, State of Inc.: \_\_\_\_\_ Name and Address of Agent for Service: \_\_\_\_\_  
 \_\_\_\_\_  
 If a Partnership, Name and Address of General Partners: \_\_\_\_\_  
 \_\_\_\_\_  
 Name and Address of Limited Partners (if any): \_\_\_\_\_  
 \_\_\_\_\_  
 If a Limited Liability Company, Name and Address of Members: \_\_\_\_\_  
 \_\_\_\_\_  
 If Individuals, Name and Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Years in Bus.: \_\_\_\_\_ Person to contact: \_\_\_\_\_  
 Nature of Bus: \_\_\_\_\_

### PLEASE LIST ALL BANK(S): (Business & Personal)

Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Personal  Business  
 Account Name: \_\_\_\_\_ Account #: \_\_\_\_\_  
 Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Personal  Business  
 Account Name: \_\_\_\_\_ Account #: \_\_\_\_\_

### TRADE REFERENCES, BUSINESS (if none, Personal)

Current Landlord's Name: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Address: \_\_\_\_\_ How long as tenant: \_\_\_\_\_  
 Insurance Agency: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Address: \_\_\_\_\_ Agent: \_\_\_\_\_  
 Other reference: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Comments: \_\_\_\_\_  
 Other reference: \_\_\_\_\_ Tel#: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Comments: \_\_\_\_\_

### PERSONAL INFORMATION

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Previous Address (if less than 2 years): \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Driver's Lic. (# and state): \_\_\_\_\_  
 Employer: \_\_\_\_\_ Tel #: \_\_\_\_\_  
 Employer's Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

### SPOUSE'S INFORMATION

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

INITIALS

INITIALS

Address: \_\_\_\_\_  
Previous Address (if less than 2 years): \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Driver's Lic. (# and state): \_\_\_\_\_  
Employer: \_\_\_\_\_ Tel #: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Monthly income: \_\_\_\_\_

**HAVE YOU EVER FILED FOR BANKRUPTCY?**

Business:  Yes  No When: \_\_\_\_\_ State filed: \_\_\_\_\_ Chapter: \_\_\_\_\_  
Personal:  Yes  No When: \_\_\_\_\_ State filed: \_\_\_\_\_ Chapter: \_\_\_\_\_

**MORTGAGE HOLDER (PERSONAL):**

Personal: \_\_\_\_\_  
Acct #: \_\_\_\_\_  
Tel #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_

**MORTGAGE HOLDER (BUSINESS):**

Business: \_\_\_\_\_  
Acct #: \_\_\_\_\_  
Tel #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact: \_\_\_\_\_

**PLEASE ATTACH A CURRENT FINANCIAL STATEMENT AND COPIES OF FEDERAL TAX RETURNS FOR THE LAST 3 YEARS FOR EITHER THE BUSINESS OR YOURSELF (whichever is going to be shown as 'Lessee' in the lease).**

**IN CASE OF EMERGENCY PLEASE CONTACT:**

Name: \_\_\_\_\_  
Tel #: \_\_\_\_\_  
Address: \_\_\_\_\_

**INFORMATION CONCERNING EXISTING LOCATION:**

What is the size of the facility/office that this new space will replace? \_\_\_\_\_  
What is the monthly rent for the space that is being replaced? \_\_\_\_\_  
What is the reason for acquiring the new space? \_\_\_\_\_

I HEREBY GIVE PERMISSION FOR THE INDIVIDUALS AND BUSINESS LISTED ABOVE AS REFERENCES TO PROVIDE FINANCIAL AND CREDIT INFORMATION TO MY PROSPECTIVE LESSOR, HIS MANAGER AND/OR HIS BROKER. I ALSO HEREBY AUTHORIZE THE OWNER AND HIS/HER REPRESENTATIVES TO PERFORM A CREDIT CHECK ON MYSELF AND/OR MY COMPANY

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 LESSOR, BE TERMINATED AT ANY TIME. IN ADDITION, THE LESSOR IS HEREBY GRANTED PERMISSION TO VERIFY ALL CREDIT/PERSONAL INFORMATION AND TO OBTAIN ANY CREDIT REPORTS IT DEEMS NECESSARY. SIGNATURES TO THIS APPLICATION ACCOMPLISHED BY MEANS OF ELECTRONIC SIGNATURE OR SIMILAR TECHNOLOGY SHALL BE LEGAL AND BINDING.

**By Lessee**

Executed at: \_\_\_\_\_  
On: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_  
Name Printed: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

\_\_\_\_\_  
INITIALS

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By: \_\_\_\_\_  
Name Printed: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Federal ID No.: \_\_\_\_\_

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INITIALS

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