LEASE APPLICATION

PERSONAL INFORMATION

| Name of Applicant: | | | | |
|--------------------------------------|------------------------------|----------------|--|--|
| | Date of Birth: | | | |
| Home Address: | | | | |
| City: | | | | |
| Home Phone #: | | Cell Phone #: | | |
| Work Phone #: | Fax Number: | | | |
| Primary Email Address: | | | | |
| Other Email Address (if applicable): | | | | |
| Spouse's Name: | | | | |
| Social Security Number: | | Date of Birth: | | |
| Spouse's Work #: | Cell Phone #: | | | |
| Spouse's Email Address: | | | | |
| Business Partner (if applicable): | | | | |
| Social Security Number: | | Date of Birth: | | |
| Home Address: | | | | |
| City: | State: _ | Zip Code: | | |
| Home Phone #: | | Cell Phone #: | | |
| Work Phone #: | Fax Number: | | | |
| Partner's Email Address: | | | | |
| | If no, country of residence: | | | |

| Residence: Do you Own? | Rent? | H | low long: | | | |
|--|-------------------------|----------|------------------------------|--|--|--|
| Landlord or Mortgage Holder: | | | | | | |
| Have you ever been adjudicated as bank | rupt? | | When? | | | |
| Have you ever been convicted of a felon | ıy? | | When? | | | |
| Are there any judgments or legal proceed | dings pending agai | inst you | ? | | | |
| If yes, please explain: | | | | | | |
| | | | | | | |
| BUSINESS | | | | | | |
| Corporate Name, if any: | | | | | | |
| Doing Business as: | | | | | | |
| Tax ID: | State of Incorporation: | | | | | |
| Business Address: | | | | | | |
| City: | State: | | Zip Code: | | | |
| Premises to be used for: | | | | | | |
| | | | | | | |
| Is This Business New? or Existing? | How many loo | cations | are you currently operating? | | | |
| What percent of the equity in the above | businesses do you | own?_ | | | | |
| Who will be responsible for the daily op | eration of this loca | ıtion? _ | | | | |
| How long have you been in business? | | | | | | |
| Describe Your Business Experience: | | | | | | |
| | | | | | | |
| REAL ESTATE REFERENCES | | | | | | |
| Present Location(s): | | | | | | |
| 1 | SF _ | | _ How Long? | | | |
| 2. | SF | | _ How Long? | | | |

| Present and former Landlord | | • |
|---|---|--|
| 1. | | |
| 2 | | |
| | | |
| Name of Property this applie | cation is for: | |
| Address: | | |
| Suite Number (if applicable |): | Square Footage: |
| Planned interior improveme | nts: | |
| Anticipated timeframe for in | mprovements: | |
| Anticipated costs of improv | ements: | |
| WARRANTS THAT THE I OMNI LEASING OF CENT DEEMED NECESSARY TO SIGNING YOU AUTHORI INFORMATION TO THE A APPLYING TO LEASE. | NFORMATION PROVI TRAL FLORIDA IS AU O VERIFY THE UNDE ZE OMNI LEASING O APPROPRIATE LANDI | THE UNDERSIGNED(S) REPRESENTS AND IDED IS TRUE AND COMPLETE, AND THAT THORIZED TO MAKE ALL INQUIRIES RSIGNED(S) CREDIT HISTORY. ALSO BY F CENTRAL FLORIDA TO SHARE THIS LORD FOR THE PROPERTY YOU ARE e, or partner of the business must sign. |
| Signature | (Date) | Print Name |