



StateWide Realty, LLC
 207 Montgomery Street, Suite 215
 Montgomery, AL 36104
 Phone: (334) 834-2747
 FAX: (334) 834-2336

COMMERCIAL RENTAL APPLICATION
(Please print legibly)

DATE: _____

Accepted _____ Denied _____
(for office use only)

PERSONAL INFORMATION:

Name: _____ Home Phone: () _____
 Title: _____ SSN: _____
 Home Address: _____ Birthdate: _____
Mo / Day / Year

BUSINESS INFORMATION:

Business Name: _____ Federal Tax ID Number: _____ - _____
 Business Address: _____
 Length In Business: _____ years / months *(circle)*
 Business Phone: () _____ Business Fax: () _____
 Email: _____

CREDIT REFERENCES:

(please list three (3) creditors)

<i>CREDITOR:</i>	<i>ADDRESS:</i>	<i>PHONE NUMBER:</i>
1 _____	_____	() _____
2 _____	_____	() _____
3 _____	_____	() _____

Number of Suites Desired: _____ Amount of square footage needed: _____

I acknowledge that all of the information given is true to the best of my knowledge and understand that intentional falsification is grounds for automatic denial. In addition, my signature authorizes StateWide Realty, LLC to receive and/or review a copy of my credit report, background check, and/or any other reasonable report to verify my credit worthiness as a prospective tenant. Additionally, I acknowledge that an electronic signature and submittal via world wide web or electronic mail constitutes an authorization of the same.

Signature: _____ Date: _____