

APPLICATION TO LEASE

Please answer the following questions as completely as possible.

Name & Address of Shopping Center: _____ **Type of Business to be conducted:** _____

Name of Applicant: **First:** _____ **Middle:** _____ **Last:** _____

Telephone Number: Business:() _____ **Home:**() _____

Present Home Address: **Number & Street** _____ **City** _____ **State** _____ **Zip** _____

Previous Home Address: _____

Time in Present Home: _____ (Yrs/Mos) **Do you: Own** _____ **Rent** _____ **Monthly Payment:** _____

Mortgage Holder/Landlord Name & Address: _____

You Social Security Number: _____ **Drivers License Number:** _____ **Date of Birth:** _____

Employment Information:

Employer: _____ **Self Employed: Yes** _____ **No:** _____

Address: _____ **Phone Number:**() _____

Length of Employment: _____ (Yrs/Mos) **Job Title:** _____ **Monthly Gross Income:** _____

Do you own your own business now? Yes _____ **No** _____

If Yes, please provide the following information:

Name of Business: _____

Address of Business: _____

Length of Time in Business: _____

Landlord: _____ **Telephone Number:**() _____

Are you:
a) Relocating an existing Business? **Yes** _____ **No** _____
b) Adding a location? **Yes** _____ **No** _____
c) Starting a new business? **Yes** _____ **No** _____

Do you have a Bank Account? Yes _____ **No** _____

If YES, please provide the following information:

Name of Bank: _____

Address of Bank: _____

Name on Account: _____

Account Number: _____

Marital Status: _____ (If married, please provide the following information regarding your spouse)

Drivers License Number: _____

Name: _____ Social Security Number: _____ Date of Birth: _____

Trade References:

Name: _____ Phone Number:() _____

Address: _____ Account No.: _____

Name: _____ Phone Number:() _____

Address: _____ Account No.: _____

Name: _____ Phone Number:() _____

Address: _____ Account No.: _____

Automobiles Owned: Make: _____ Year: _____ License Number: _____

Make: _____ Year: _____ License Number: _____

Personal Bank Accounts:

Bank Name:	Branch:	Checking/Savings:	Account Number:
_____	_____	_____	_____
_____	_____	_____	_____

Credit References:

Type of Loan:	Note Holder:	Address:	Loan Number:	Monthly Payments:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Active Credit Cards:

Name:	Account Number:	Balance:	Monthly Payments:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I, the undersigned, do hereby authorize Urban Development Organization, Ltd. (UDO) and its designated representatives to make whatever inquiries regarding my financial status, as indicated on the foregoing application, found necessary and appropriate, for the purpose of evaluating my Application to Lease. Further, I authorize UDO and its designated representatives to provide credit information regarding your credit experience with me.

Applicant's Signature _____ Date _____

Spouse's Signature _____ Date _____