

Center Name: _____



65 Harristown Rd., Suite 301 • Glen Rock, NJ 07452 • T. 201.612.8800 • www.bedrin.com

LEASE APPLICATION AND NEW TENANT INFORMATION SHEET

PERSONAL INFORMATION

Name _____
Phone (H) _____
Phone (C) _____
Date of Birth _____ Marital Status _____
Social Security No. _____
Present Address _____
City, State, Zip _____
No. Of Years _____ Own? _____ Rent? _____
Previous Address _____
City, State, Zip _____
Driver's License No. _____
Have you declared bankruptcy
in the past 7 (seven) years? _____

BUSINESS INFORMATION

Legal Business Name _____
DBA _____
Form of Business: LLC or Inc. _____
Date Business Began _____
Fed ID# _____
City, State, Zip _____
Business Phone _____
of Years at this Location _____
Current Lease Written Under _____
Prospective Lease Written Under _____
Landlord or Mortgage Holder (Name and Phone #)

Current Annual Lease Obligation \$ _____

EMPLOYMENT INFORMATION

Name of Employer _____
Employer Address _____
City, State, Zip _____
Type of Business _____
Position or Title _____
Years Employed _____
Work Phone _____

ASSETS

Cash on Hand in Banks _____
Real Estate Owned _____
Stocks and Investments _____
Automobiles, etc. _____
(List) _____
Other Assets _____
(List) _____
TOTAL ASSETS: \$ _____

PERSONAL BANKING INFORMATION

Bank Name _____
Bank Address _____
City, State, Zip _____
Phone _____
Checking Acct. # _____
Savings Acct. # _____
List other Accts and #'s _____

Identify any General Partners/Principals/
Majority Owners _____

ANNUAL GROSS INCOME

Salary _____
Bonus _____
Commissions _____
Dividends _____
Interest _____
Rental Income _____
Other Income _____
TOTAL INCOME: \$ _____

TOTAL LIABILITIES

Real Estate Loans _____
(List) _____
Automobile Loans _____
(List) _____
Credit Cards _____
(List) _____
Other Liabilities _____
TOTAL LIABILITIES: \$ _____

NET WORTH: \$ _____
(Assets minus liabilities)

DECLARATION

The undersigned declares that this information is true and correct to the best of their knowledge. Each of the undersigned hereby authorizes the Landlord and/or Owner to review their credit history and to contact any and all references listed above (and any other sources deemed appropriate by management) for additional credit information. The undersigned understands that additional information may be required, which could include but is not limited to balance sheets, income statements, pro formas, tax returns and business plans.

Business Entity: _____
By: _____

Principals: _____
Name: _____

Please fax application to 201.689.8936