

COMMERCIAL KITCHEN LEASE APPLICATION
Our Saviour's Lutheran Church
Williamsburg, Virginia 23188

LANDLORD INFORMATION

Landlord

Landlord's Name: Our Saviour's Lutheran Church

Landlord's Address: 7479 Richmond Rd, Williamsburg, VA 23188

Landlord's Phone: (757) 564-374

Property Information

All monetary values are expressed in US Dollars.

Rental Property Address: 7479 Richmond Rd, Williamsburg, VA 23188.

Application to rent suite/bay #: _____

Tenant's leased area: _____ square feet.

Anticipated Possession Date: January 2, 2019.

The term of the tenancy will be: for none months.

The base rent will be: \$425.00.

Tenant is not responsible for any operating costs.

The initial security deposit will be: \$300.00.

No advance rent will be required.

TENANT INFORMATION

Business Information

Business Name: _____

Present Address: _____

Home Phone: (_____) _____ Fax: (_____) _____

Intended Use of Premises: _____

Emergency Contact: _____ Phone: (_____) _____

Check One: _____ Sole Proprietor _____ Partnership _____ Corporation

Type of Business: _____ Retail _____ Wholesale _____ Manufacturer

_____ Other _____

Business Name: _____

Present Address: _____

Date Established: _____ Number of Employees: _____

Parent Company Name: _____

Parent Company Address: _____

How long at present address: _____ Monthly Payment: _____

Present Landlord Name:

Present Landlord Address:

Present Landlord Phone: (_____) _____

How long at previous address: _____ Monthly Payment: _____

Previous Landlord Name:

Previous Landlord Address:

Previous Landlord Phone: (_____) _____

Business Owner / Partner / Stockholder Information

First Owner's Name: _____

Home Address: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Email Address (Optional): _____ Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

Second Owner's Name: _____

Home Address: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Email Address (Optional): _____ Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

Third Owner's Name: _____
Home Address: _____
Home Phone: (_____) _____ Alternative Phone: (_____) _____
Email Address (Optional): _____ Date of Birth: _____
Social Security Number: _____
Driver's License Number: _____

Banking Information

Banking Institution: _____
Address: _____ Phone: (_____) _____

(If you bank with more than one institution, please list second bank below)

Banking Institution: _____
Address: _____ Phone: (_____) _____

Credit References

List industry references from which you make purchases through credit accounts.

Company Name: _____
Contact Name: _____
Address: _____ Phone: (_____) _____

Company Name: _____
Contact Name: _____
Address: _____ Phone: (_____) _____

Company Name: _____
Contact Name: _____
Address: _____ Phone: (_____) _____

Credit Check Authorization

I certify that the information provided is true, accurate and complete. I authorize the individual or organization to whom this application is submitted to investigate all bank, credit and trade references named in this application, and to obtain information about the credit status of the applicant in order to assess the applicant's suitability as a tenant/lessee.

Authorized Signature _____ Date _____
Authorized Signature _____ Date _____