

Commercial Lease Application

Applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Employment Information (if employee)			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
Existing Business Information			
Business Name:		Years in Business:	
Address:		Years at this address:	
City:	State:	ZIP Code:	Phone:
Website and description of business:			
Space and Building Information			
Building Address:			
SF of Space to Lease:	Floor:	Rent:	
Lease Term and Options:			
Other Proposed Terms:			
Guarantor Information if Different from Above			
Name:			
Relationship to Applicant:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Landlord References			
Name:	Address:	Phone:	
I authorize the verification of the information provided on this form as to my credit, employment, and background check. I have received a copy of this application.			
Signature of applicant:			Date:
Signature of guarantor:			Date:

Please also attach the following with this application:

- Company financial statements, or tax returns from the last 2 years
- Bank statement showing at least the equivalent to 6 months of rent
- Background about the business and its Principals

Complete, sign, and return via **email** to ml@mcre.nyc