

COMMERCIAL CREDIT APPLICATION FOR KAMINS REAL ESTATE

COMPANY NAME: _____ FEDERAL TAX ID #: _____

COMPANY TELEPHONE: _____ FAX: _____ ANNUAL INCOME: \$ _____

BUSINESS DESCRIPTION: _____

NUMBER OF EMPLOYEES: _____ NUMBER OF PARKING SPACES NEEDED: _____

APPLICANT NAME: _____ SOCIAL SECURITY: _____

APPLICANT ADDRESS: _____ TELEPHONE: _____

CURRENT BUSINESS LOCATION: _____

CURRENT LANDLORD: _____ CONTACT INFO: _____

PREVIOUS BUSINESS LOCATION: _____

PREVIOUS LANDLORD: _____ CONTACT INFO: _____

HAVE YOU DECLARED BANKRUPTCY? _____

IF SO, PLEASE BRIEFLY DESCRIBE THE CIRCUMSTANCES: _____

CREDIT REFERENCES

(1) NAME: _____ TELEPHONE: _____

ADDRESS: _____

(2) NAME: _____ TELEPHONE: _____

ADDRESS: _____

BANK

SAVINGS: _____ ADDRESS: _____

CHECKING: _____ ADDRESS: _____

SIGNATURE REQUIRED TO AUTHORIZE VERIFICATION OF INFORMATION PROVIDED ABOVE AND ACCESS CREDIT REPORT*

SIGNATURE: _____ DATE: _____

*Failure to disclose or knowingly provide inaccurate information will automatically disqualify your application.