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PERSONAL INFORMATION

NAME: _____ DATE OF BIRTH: _____
HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____
SOCIAL SECURITY #: _____ EMAIL ADDRESS: _____
CURRENT HOME ADDRESS: _____
CITY STATE ZIP: _____
DRIVER'S LICENSE: STATE: _____ NUMBER: _____

BUSINESS INFORMATION

COMPANY NAME: _____
BUSINESS ADDRESS: _____
CITY STATE ZIP: _____ PHONE: _____
NUMBER OF EMPLOYEES: _____ ANNUAL SALES/REVENUE: _____
DESCRIPTION OF BUSINESS: _____

CURRENT LANDLORD INFORMATION

LANDLORD NAME: _____
COMPLETE ADDRESS: _____
DATES OCCUPIED: _____ PHONE: _____

REFERENCES

BUSINESS REFERENCE: _____ RELATIONSHIP: _____
PHONE: _____ EMAIL: _____
BANK REFERENCE: _____ CONTACT: _____
BANK ADDRESS: _____
PHONE: _____ TYPE OF ACCOUNT: _____

COMMERCIAL SPACE YOU ARE APPLYING FOR: _____
DESIRED LEASE START DATE: _____ END DATE: _____
HOW DID YOU HEAR ABOUT US? _____

SIGNATURE: _____ DATE: _____