

CORPORATE SUITE LEASE APPLICATION
(\$35 Application Fee)

Building/Street Address/Unit # _____

Lease Term Dates: _____ Monthly Rent: _____

Lessee Information

Full Name: _____ Date of Birth: _____

Current Address/City/State/Zip _____

Social Security Number: _____ Daytime Phone: _____

Driver's License #: _____ State: _____

Email address: _____

Automobile Make/Model: _____ Lic. Plate #/State: _____

Emergency Contact: _____ Telephone #: _____

Background Information

Employer: _____ Telephone #: _____

Lessee's Position: _____ Salary: _____

By signing this form, Lessee consents to release any information regarding employment/income needed to verify this application.

Lessee's Signature _____ Date _____

TO BE COMPLETED BY GRANDIN PROPERTIES

Date approved: _____ **Approved By:** _____