



BUSINESS APPLICANT SCREENING CHARGE RECEIPT

Check # _____	\$ 45.00	per Applicant
Cash _____	x _____	
Rec. # _____	\$ _____	Total Due

Applicant Screening Charge means any nonrefundable payment of money charged by Commercial Property Management, Inc. of a prospective tenant prior to entering into a Lease Agreement for a commercial unit. The purpose of the fee payment is to process an application for a Lease Agreement with Commercial Property Management, Inc., agent for owners.

I/We have read, understand and have had any questions answered regarding the above information and that I am an authorized individual to request a credit check as for this partnership, corporation or sole proprietorship:

_____	_____	_____
NAME	SIGNATURE	DATE
_____	_____	_____
NAME	SIGNATURE	DATE
_____	_____	_____
NAME	SIGNATURE	DATE
_____	_____	_____
NAME	SIGNATURE	DATE

I hereby acknowledge the receipt of the applicant screening charge:

Commercial Property Management, Inc. Date



BUSINESS/COMMERCIAL APPLICATION

BUSINESS NAME: _____

LOCATION YOU WISH TO LEASE: _____ DATE: _____

TERM OF LEASE REQUESTED: _____ YRS _____ MONTH TO MONTH

CONTACT FOR THIS APPLICATION: NAME _____ PHONE #: _____

SOLE PROPRIETOR: NAME: _____ POSITION _____

SSN #: _____

NAME OF CORPORATION (As licensed to do business in Oregon): _____

REGISTRY #: _____

TAX ID #: _____

PARTNERSHIP (As licensed to do business in Oregon): _____

REGISTRY #: _____

TIN#: _____

TYPE OF BUSINESS: _____

MONTHLY NET INCOME (EIN) _____

BANK REFERENCE: BANK NAME _____ CONTACT NAME _____

PRESENT BUSINESS ADDRESS: _____

CITY _____ STATE _____ ZIP _____

PRESENT LANDLORD'S NAME _____ PHONE _____

LANDLORD ADDRESS _____

CITY _____ STATE _____ ZIP _____

YEARS DOING BUSINESS AT THIS ADDRESS? _____ CURRENT MONTHLY RENT _____

WHY ARE YOU MOVING? _____

FORMER ADDRESS _____

(if less than 3 years at present address) CITY _____ STATE _____ ZIP _____

FORMER LANDLORD'S NAME _____ PHONE _____

LANDLORD ADDRESS _____

CITY _____ STATE _____ ZIP _____

YEARS AT THIS ADDRESS? _____ MONTHLY RENT _____

WHY DID YOU MOVE? _____

LIST TWO TRADE REFERENCES:

- 1. BUSINESS NAME _____ ACCOUNT NUMBER _____
CONTACT NAME _____ PHONE _____ YEARS KNOWN: _____
- 2. BUSINESS NAME _____ ACCOUNT NUMBER _____
CONTACT NAME _____ PHONE _____ YEARS KNOWN: _____

HAS THE BUSINESS EVER FILED BANKRUPTCY? _____
IF YES, WHAT DATE, COUNTY AND STATE IS THE BANKRUPTCY FILED? _____

HAS THE BUSINESS EVER BEEN EVICTED WITH OR WITHOUT COURT PROCEEDINGS FROM ANY RENTAL UNIT? _____

HAS THE BUSINESS EVER WILLFULLY AND/OR INTENTIONALLY REFUSED TO PAY RENT WHEN DUE? _____

HAVE YOU OR ANY OTHER PERSON NAMED ON THIS APPLICATION EVER BEEN CONVICTED OF DEALING OR MANUFACTURING ILLEGAL DRUGS? _____

HAVE THE APPLICANT, CO-APPLICANT OR SPOUSE EVER BEEN CONVICTED OF A CRIME? _____
IF YES, WHAT WAS THE NATURE OF THE CRIME AND THE DATE OF THE CONVICTION? _____

I OFFER THE FOREGOING INFORMATION AS INDUCEMENT TO COMMERCIAL PROPERTY MANAGEMENT, INC. TO LEASE ME A RENTAL UNIT. I DECLARE SAID FOREGOING INFORMATION TO BE TRUE AND CORRECT AND DO HEREBY AUTHORIZE COMMERCIAL PROPERTY MANAGEMENT, INC. TO CONDUCT A CRIMINAL AND CREDIT CHECK AND TO VERIFY THESE REFERENCES. I UNDERSTAND I WILL BE DENIED IF I HAVE MISREPRESENTED ANY INFORMATION ON THIS APPLICATION, AND IF MISREPRESENTATIONS ARE FOUND AFTER A LEASE AGREEMENT IS SIGNED, MY TENANCY IS SUBJECT TO TERMINATION.

I/WE HAVE READ, UNDERSTAND AND HAVE HAD ANY QUESTIONS ANSWERED REGARDING THE ABOVE INFORMATION.

SIGNATURE OF BUSINESS APPLICANT _____ DATE: _____

SIGNATURE OF CO-APPLICANT _____ DATE: _____

SIGNATURE OF CO-APPLICANT _____ DATE: _____

SIGNATURE OF CO-APPLICANT _____ DATE: _____



**COMMERCIAL
PROPERTY MANAGEMENT INC.**

**718 BLACK OAK DRIVE, SUITE A
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