

# CRAIG-HENRY ASSOCIATES, LLC

Craig Henry Building | 201 South Craig St. Pgh, PA 15213 | (412) 681-7634

## COMMERCIAL RENTAL APPLICATION

### APPLICANT INFORMATION

**Business NAME:** \_\_\_\_\_

Home phone: \_\_\_\_\_ Business phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Current address: \_\_\_\_\_ Business email: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Unit applied for: \_\_\_\_\_  
Intended use: \_\_\_\_\_

**Lessor's NAME:** \_\_\_\_\_

Address: \_\_\_\_\_ Personal email: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

### EMPLOYER INFORMATION (IF APPLICABLE)

**Current Employer and Name of Supervisor:** \_\_\_\_\_

Employer address: \_\_\_\_\_ Length of employment: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Position: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_ Annual income: \_\_\_\_\_

**Previous employer:** \_\_\_\_\_

Address: \_\_\_\_\_ Length of employment: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Position: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_ Annual income: \_\_\_\_\_

### REFERENCES

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

**EMERGENCY CONTACT**

Emergency Contact Name: \_\_\_\_\_

Address:

City:

State:

ZIP code:

Email:

Home phone:

Cell phone:

Relationship:

**BANK AND RETAIL STORE REFERENCES (CHECKING, SAVINGS, CREDIT CARDS)**

Name:

Account No:

Current Bal:

Monthly payment:

**VEHICLE OWNERSHIP**

Make

YEAR

PLATE NO

STATE

Drivers License # \_\_\_\_\_

State

**Important notes:**

**NO PETS PERMITTED IN THE BUILDING, TEMPORARY OR PERMANENT**

**NO SMOKING IN THE BUILDING AT ANY TIME**

**NO EXCESSIVE NOISE AT ANY TIME**

Application Fees Received: \*                    \$ \_\_\_\_\_                    Date: \_\_\_\_\_

Security Deposit: \*\*                                \$ \_\_\_\_\_                                Date: \_\_\_\_\_

First month rent received:                        \$ \_\_\_\_\_                                Date: \_\_\_\_\_

Last month rent received:                         \$ \_\_\_\_\_                                Date: \_\_\_\_\_

\*Application fees: \$150 non-refundable application and lease preparation fee.

\*\* Security Deposit (2 month's rent) required with delivery of signed lease to Lessor.

Signature of applicant: \_\_\_\_\_

Date:

Signature of applicant: \_\_\_\_\_

Date:

SSN #: \_\_\_\_\_