



Return via Fax: at 888-373-7060 or email to MGT@JandJreynolds.com

Property Applying for: _____
Name of Applicant(s): _____
Type of Business (Sole Proprietor, LLC, Partnership, etc.): _____
Trade Name of Business: _____ Tax ID: _____

Information on Individuals or Corporate Officers:

Name: _____ SS#: _____ Home Ph.: _____ DOB: _____
Driver's License#: _____ State Issued: _____
Home Address: _____ City/State/Zip: _____
Employed By: _____ Phone: _____ How Long: _____ Annual Income: _____
Bankruptcy Proceedings within last 5 years?..... Yes: _____ No: _____
Pending Judgments or Suits which may affect ability to meet rent obligations?..... Yes: _____ No: _____

Name: _____ SS#: _____ Home Ph.: _____ DOB: _____
Driver's License#: _____ State Issued: _____
Home Address: _____ City/State/Zip: _____
Employed By: _____ Phone: _____ How Long: _____ Annual Income: _____
Bankruptcy Proceedings within last 5 years?..... Yes: _____ No: _____
Pending Judgments or Suits which may affect ability to meet rent obligations?..... Yes: _____ No: _____

Additional Pages May be Added if Necessary.

Company Information:

Home Office Address: _____ Phone: _____
City/State/Zip: _____ P.O. Box/City/State/Zip: _____
Name/Title of Officer(s) Who will Sign Lease: _____
Current Business Address: _____ City/State/Zip: _____
How Long?: _____ Yrs Current Rent/Mo.: _____ Sq Ft current Space: _____
Current Landlord: _____ Phone: _____
Landlord Address: _____ City/State/Zip: _____
How long has company been in business?: _____ Yrs
Primary Service or Product: _____
Has the company, its parent company, or its subsidiary now or in the last 5 years been in bankruptcy proceedings?: No: _____ Yes: _____
Is There a Dun & Bradstreet Report?: No: _____ Yes: _____

Information and References:

Banking:

Name of Bank: _____
Checking: _____ Address/Branch: _____
Savings: _____ Point of Contact: _____
Other: _____ Phone: _____ Acct.# _____

Trade/Credit:

Name: _____ Phone: _____
Address: _____ Contact: _____
Name: _____ Phone: _____
Address: _____ Contact: _____
Name: _____ Phone: _____
Address: _____ Contact: _____

Personal/Credit:

Name: _____ Phone: _____
Address: _____ Contact: _____
Name: _____ Phone: _____
Address: _____ Contact: _____

Other Information to be Considered:

The above information on this form is correct and additional documentation to verify information will be provided if requested. Permission is also given to check with references, credit bureaus, and others as necessary to confirm and/or obtain additional information concerning the application. It is understood that inaccurate information provided herein may (at the option of Lessor) be grounds for default in the lease agreement

Name Signature Title Date

Name Signature Title Date

**Rental Application
Background Investigation
Release Form**

I (we) understand that an investigation will be made of me (us) and or my business entity and/or corporation, for purposes which will provide information including, but not limited to, credit standing, character, mode of living, criminal record, driving record, and reputation. By signing this Release Form, I (we) give my (our) permission for this investigation and hereby authorize and instruct recipients a copy of this Release form to release any and all information, without limitation, requested by J&J Reynolds LLC, both verbally and written. I (we) further hereby release and hold harmless J&J Reynolds LLC, its agents, and employees, and those parties providing such information, from any and all liability, loss, or claim as a result of releasing or obtaining such information. I (we) also understand that the acceptance or rejection of the application for rental with J&J Reynolds LLC may or may not be based upon information gathered in the investigation and is at the sole discretion of J&J Reynolds LLC.

Applicant: _____
Social Security #: _____
Home Address: _____
City, State, Zip: _____
Work Place and Address: _____
City, State, Zip: _____

Applicant: _____
Social Security #: _____
Home Address: _____
City, State, Zip: _____
Work Place and Address: _____
City, State, Zip: _____

Name Signature Date

Name Signature Date

Additional Pages May be Added if Necessary.