

MMC Commercial Real Estate  
 11299 Owings Mills Boulevard, Suite 200  
 Owings Mills, Maryland 21117  
 Office: (410) 902-0290 Fax: (410) 902-4760

**Retail Leasing Application**

**PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
 Last First M.I.

Address: \_\_\_\_\_  
 Street Address Apartment/Unit #

City State ZIP Code

Home Phone: ( ) Alternate Phone: ( )

E-mail Address: \_\_\_\_\_

Social Security Number or Government ID: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Please Circle One: **MARRIED** **SINGLE** **DIVORCED**

Spouse's Name: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Spouse's Work Phone: ( )

**CURRENT EMPLOYMENT INFORMATION**

Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

Work Location: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: ( ) Cell: ( )

Start Date: \_\_\_\_\_ Salary: \$ \_\_\_\_\_

**BUSINESS INFORMATION**

Corporate Name: \_\_\_\_\_ Tax Payer I.D. \_\_\_\_\_  
 Check One:  Sole Proprietorship  Partnership  Corporation

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

Address: \_\_\_\_\_  
 Street City State ZIP Code

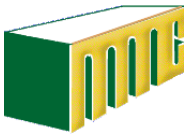
Office Phone: ( ) Fax: ( )

Type of Business: \_\_\_\_\_

**REFERENCE**

Landlord Name & Name of Shopping Center: \_\_\_\_\_

Work Phone: ( ) Cell Phone: ( )



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**FINANCIAL INFORMATION**

ASSETS	IN DOLLARS	LIABILITIES	IN DOLLARS
Cash on hand and in banks		Notes payable to banks	
U.S. Gov't Marketable Securities (Attach separate Schedule)		Amounts payable to others	
Real Estate Owned (Attach separate Schedule)		Accounts and bills due	
Loans Receivable		Unpaid Income Tax	
Automobiles & other personal property		Real Estate Mortgage Payables (List on separate Schedule)	
Cash value in life insurance		Other debts - itemize	
Other assets – itemize			
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
<b>NET WORTH</b>	<b>\$</b>		

Other Sources of Income	IN DOLLARS
Salary, bonuses & commissions	
Dividends	
Real Estate Income	
Other Income (Alimony, child support, etc.)	
<b>TOTAL</b>	<b>\$</b>

The information herein provided is for the purpose of procuring a lease with you on behalf of the undersigned, person or persons in whose behalf the undersigned may either severally or jointly with others, execute a guarantee in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to execute a lease. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this information to be true and correct until written notice of a change is given to you by the undersigned. You are hereby authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

Signature (Individual) \_\_\_\_\_ Date \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature (Individual) \_\_\_\_\_ Date \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Please complete this form and fax it to (410) 902-4760. Please be sure to attach any additional requested information (i.e. Tax Returns, Real Estate Schedules, etc.).**