

LEASE APPLICATION

Fax to 801-561-5511

Email to kelsey@tatebrubaker.com or

Email to lrupp@brubakerconstruction.com

Property Location:

Tenant Details

Business Name: _____

Year Business Established _____

Tax ID# _____

Address: _____

Phone #: _____

Fax #: _____

E-Mail / Web address: _____

Contact Person: _____

Phone / Cell # _____

Current Landlord: _____

Phone # _____

Credit Reference #1: _____

Phone # _____

Credit Reference #2: _____

Phone # _____

Personal Reference: _____

Phone # _____

| | Officer/Owner | Home Address | Phone # | Driver Lic# |
|----|---------------|--------------|---------|-------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |

Financial Details

Please see attached Verification of Deposit Letter for Financial Institution to Complete

Lease Details

Tenant Name on Contract: _____

Desired Term: _____

Term Start Date: _____

Use: _____

Notice Address: _____

of Employees: _____

Notes: **Please Attach a copy of the driver's license's for all Officers.**