

Last Revision: 2023.03.02

COMMERCIAL TENANT APPLICATION

* Please submit a \$100 application payment along with your application (payable to CMC Real Estate Group).

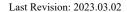
https://www.cmcreg.com/newapplications*

Email: info@cmcreg.com Phone: 470-210-0106

Tymo	of Pusiness (i.e. westernment, watail office).	
туре	e of Business (i.e. restaurant, retail, office):	
Loca	tion of Desired Premises:	Unit#:
	Application Instructions	<u>:</u>
COMPLETI	a for your interest in applying for the above unit. All documents E. Any missing documents will delay the application process. Are on may be grounds for DENIAL or TERMINATION of the lease CANNOT BE VERIFIED, it may be DI	ny misstatements or omissions made on your e. If information given on the application
	Attach Additional Document	<u>s:</u>
1	NON-REFUNDABLE Application fee (made payable to Each applicant's photo ID (driver's license, passport, etc.) Credit & Background Check Authorization (see attache EXISTING/NEW BUSINESSES: If you have registered your business, your company's Art GA, can be found on Georgia Corporations Division business sea If available, most recent 3 month's Business bank statem If existing business, current Balance Sheet and Income S If applicable, any pre-approved business loans from finate NDIVIDUAL: If employed or self-employed, Applicant's most recent 3 mand Applicant's most recent 3 month's Personal bank statemed Applicant's most recent 3 years' Federal Tax Returns DTHER: If there is a separate Guarantor, Guarantor's most recent 3 for the property of the property of the payable to the	ed form) ticles of Incorporation (if incorporated in rch https://ecorp.sos.ga.gov/) tents tatement ncial institution nonth's Paystubs or 1099-MISC ents
Drivor's I:	OFFICE USE ONLY cense verified via DDS? □ Yes □ No	
	enter Use Permitted? Yes No, restriction found on lease:	
	te Cash Available (checking & savings): \$	

Reported Total Income on last Tax Return: \$

¹ If Federal tax returns are unavailable, other acceptable forms include 1099-MISC or W-2

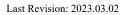




APPLYING FOR ONE OF OUR SPACES?

Please review this handout for more information and expectations:

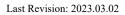
Application Review & **Application Negotiations Lease Drafting** Signing Background Check Submit all • Allow 3-5 • Agree to • ALLOW 3-5 No further requested business main terms business revisions, paperwork and days to days Lease signed • Landlord documentation review all & notarized must • Agent to •Include Letter by Tenant materials approve draft Lease of • Agent to Lease Deal • Lease signed • Manager to Intent/Proposal review with by Landlord **Points** review & Landlord • COI must be approve Lease Draft given at • Send to signing. Tenant for review





APPLICANT QUESTIONNAIRE:

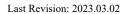
	Desired Monthly Rent: \$ Desired Lease Term:	_ Desired Sq. Ft.: _ Expected # of Months for B	Desired Move In: Build Out
1.	Have you already viewed the space? □	No □Yes, Name of Agent Wh	no Showed:
2.	Separate Letter of Intent (LOI) attache	ed? □Yes □No	
3.	Do you have any special requests (conc	essions) from the Landlord?	If so, please detail:
4.	Are you taking out a loan to start the b	ousiness? □Yes □No	
5.	Have you ever filed for bankruptcy? □	l No □ Yes, explain:	
6.	Or if you have other negative history o	n your credit report, please e	xplain:
7.	Have you ever filed suit against a landl	lord? □ No □ Yes, explain:	
8.	Have you ever been a defendant in an uany obligation of a rental agreement or	` '	awsuit or defaulted (failed to perform)
9.	Have you ever been convicted of a crim	ne? □ No □ Yes, explain:	
10.	Does your business require the use of a on-site? Not including temporary loading		s, and/or buses? Will you need to park it
11.	How did you hear about the vacant uni	it?	
	□ Drive-by □ LoopNet □ CoStar □ Ref	ferral:	
12.	. Any additional comments for the Least	ing Agent:	





BUSINESS INFORMATION:

Tradename (dba) to Appea	r on Lease:			
☐ Corporation ☐ LLC ☐ Pa	artnership □ LLP □ S	Sole Proprietor □ N	on-Profit	
☐ Other:	State in Where Entity Formed:			
Year Formed:	Federal Taxpay	ver Identification N	lo:	
Main or Home Address: _				
City:Business Phone:		State:	Zi	ip:
Business Phone:	Mobile Phone:		mail:	
Address for Notices & Billing:	Check if same as Ma		<u> </u>	
City:			Zi	ip:
NAM	IE OF PERSON	(S) WHO WII	LL SIGN LEA	ASE:
Person 1:		T	itle:	
Person 1: Social Security Number:		T Est. Credit Score:	itle: Date of Bir	th:
Person 1: Social Security Number: Driver's License Number:		T Est. Credit Score: St	itle: Date of Bir ate of Issuance: _	th:
Person 1: Social Security Number: Driver's License Number: Current Occupation:]	T Est. Credit Score:St Current Industry:	itle: Date of Bir ate of Issuance: _ 	th:
Person 1:		T Est. Credit Score: St Current Industry:	itle: Date of Bir ate of Issuance: _ 	th:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City:		T Est. Credit Score: St Current Industry: State:	itle: Date of Bir ate of Issuance: _ 	th:Zip Code:
Person 1:		T Est. Credit Score: St Current Industry: State:	itle: Date of Bir ate of Issuance: _ 	th:Zip Code:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City: Business Phone:	Mobile Phone:	T Est. Credit Score:St Current Industry:State:En	itle: Date of Bir ate of Issuance: nail:	th:Zip Code:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City: Business Phone: Person 2: Social Security Number:	Mobile Phone:	T Est. Credit Score:St Current Industry:State:En	itle: Date of Bir ate of Issuance: nail: Title: Date of Bir	th:Zip Code:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City: Business Phone: Person 2: Social Security Number: Driver's License Number:	lMobile Phone:	T Est. Credit Score: St Current Industry: State: En Est. Credit Score: S	itle: Date of Bir ate of Issuance: nail: Title: Date of Bir tate of Issuance: _	th: _Zip Code:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City: Business Phone: Person 2: Social Security Number: Driver's License Number: Current Occupation:	Mobile Phone:	T Est. Credit Score: St Current Industry: State: En Est. Credit Score: S Current Industry:	itle: Date of Bir ate of Issuance: nail: Title: Date of Bir tate of Issuance: _	th: _Zip Code:
Person 1:	Mobile Phone:	T Est. Credit Score:St Current Industry:State:En Est. Credit Score:S Current Industry:	itle: Date of Bir ate of Issuance: nail: Date of Bir tate of Issuance:	th: Zip Code:
Person 1: Social Security Number: Driver's License Number: Current Occupation: Street Address: City: Business Phone: Person 2: Social Security Number: Driver's License Number:	Mobile Phone:	T Est. Credit Score:St Current Industry:State:En Est. Credit Score:S Current Industry:State:S	itle: Date of Bir ate of Issuance: nail: Date of Bir tate of Issuance:	th: Zip Code:





NAMES OF PERSON(S) WHO WILL GUARANTEE LEASE (if different from above):

Person 1:		Title:	
			Date of Birth:
	State of Issuance:		
	urrent Occupation:		
Street Address:		•	
City:		State:	Zip Code:
Home Phone:	Mobile Phone: _	Email:_	
Person 2:		Title:	
Social Security Number: _		Est. Credit Score:	Date of Birth:
			ssuance:
Street Address:		<u> </u>	
City:		State:	Zip Code:
		<u>S (BUSINESS / PE</u>	, -
Name:			Business Personal
Street Address:		Chili	7: _n C ₁ 1
			Zip Code: e Number:
Contact Name.			e Number.
Name:			Business Personal
Street Address:			
City:		State:	:Zip Code: _
			ımber:
Name:			
G 1.1			□ Business □ Personal
Street Address:	 		
Street Address: City:		State:	Business Personal Zip Code:



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	COVER LETTER:	
Instructions: Please either attach your Bubusiness plans in the space provided below		
Is this y	vour first business? ☐ Yes ☐ N	No
Detailed list of services or items for sale:		
Attached Menu/Product List (if applicable		
OTHER RUSI	NESS LOCATIONS (IF	APPLICARLE).
	,	,
Location 1:		
Street Address:City:	State:	Zin Code:
Location 2:		
Street Address:		

City: _____ State: ___ Zip Code: ____



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APPLICATION AGREEMENT

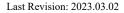
The completion of this application by Applicant(s) ("Tenant") and the acceptance of this application by Creditor ("Landlord") creates **no obligation** of Landlord to approve the application or enter into a lease with Tenant.

By completing this application, Applicant(s) do hereby give full consent and authorize, CMC REAL ESTATE GROUP, its agents, and associates to have access and obtain information on its present and past history and any information relating to the same for the limited purpose of determining the Applicant's leasing eligibility, potential negotiations related to the lease of the premises, complete any state and local filings, and perform all statutory due diligence as required under Georgia Law. This application is to be used for the purpose of establishing Applicant's current and past credit position and financial credibility and is for the use and review only by those owner(s) and representative(s) of the property Applicant is interested in leasing. The application fee covers the administrative costs associated with the application and is both MANDATORY and NON-REFUNDABLE.

A Credit Check Authorization Form (see attached) is required, in addition to this application, if Applicant is an individual or if a Guarantor is coupled with the proposed lease.

The confidentiality of the information being furnished by Applicant will be preserved except where disclosure of this information is required by applicable law or for the purposes of evaluating this proposed transaction.

APPLICANT 1 (Print Name or Company Name)		Position in Company	
Main Address			
Signature	Date		
APPLICANT 2 if applicable (Print Name)		Position in Company	
Main Address			
Signature	 Date		
APPLICANT 3 if applicable (Print Name)		Position in Company	
Main Address			





CREDIT & BACKGROUND CHECK AUTHORIZATION

Any and EACH Guarantor(s) will also need to sign and authorize Credit Check form

I/We, the undersigned, hereby authorize CMC REAL ESTATE GROUP, and/or any of its affiliates, partners, subsidiaries, employees or designees (hereinafter collectively referred to as "CMC REAL ESTATE GROUP"), to make any credit inquiries that CMC REAL ESTATE GROUP may deem necessary in connection with my/our lease application. This authorization also applies to inquiries regarding employment history, bank accounts, and follow-up credit inquiries/checks that CMC REAL ESTATE GROUP may deem necessary now or in the future, in connection with the tenancy contemplated.

APPLICANT 1 (Print Name)		Position in Company
Main Address		
FEIN or SSN		
Signature	Date	
APPLICANT 2 if applicable (Print Name)		Position in Company
Main Address		
SSN		
Signature	_ Date	
APPLICANT 3 if applicable (Print Name)		Position in Company
Main Address		
SSN		
Signature	_ Date	

Additional signatures \square are or \square are NOT attached.