Madison Property Management, Inc.
1202 Regent Street
Madison, WI 53715
Phone (608) 251-8777
FAX (608) 255-9656
mpm@madisonproperty.com

COMMERICAL RENTAL APPLICATION

Address applying for _____

Occupancy date _____ Rent _____ Deposit _____

Lease Term _____

APPLICANT INFORMATION

Business Name _____ Phone _____ Fax _____

Owner's Name: _____ Email _____

Owner's Social Security Number: _____/_____/_____ Owner's Date of Birth: _____/_____/_____

Type of Business _____ Established In _____

Corporation ____ Partnership ____ Limited Liability Corp. ____ Individual Owner ____ Other _____

Federal Identification Number _____

Owner's Home Address: _____

_____

Home Telephone: _____

Summary of Business Operation:

_____

_____

_____

_____

_____

_____

Business Operation Hours: _____(am/pm) - _____(am/pm)

EMPLOYMENT

Current Employer _____ Phone (____)_____ Address _____

City/State _____ Zip _____ Supervisor _____ Position _____

Total Annual Income: $_____ Additional Income:$_____

ACKNOWLEDGEMENT AND AUTHORIZATION

I, the undersigned, hereby acknowledge that I have read and understand this application, and all information that has been submitted, including the information listed on this application, is true and correct. I understand that all application information and materials are being relied upon in application processing and are a pre-condition to approval by Madison Property Management, Inc. **I hereby authorize management to conduct routine housing references, employment verification, criminal background checks, public records checks, financial reference investigations, and to obtain and rely on credit agency reports for the purpose of processing this application.** I understand and acknowledge that my performance under any lease agreement I may enter into with the landlord may be reported to such credit-reporting agency, and authorize management to obtain my credit report for the purpose of collecting any amounts due pursuant to any future lease agreement with the landlord.

Applicant's signature _____ Date _____

Personal Financial Statement of:

Enter your name here: _____

Date: _____

Assets	Amount in Dollars
Cash - checking accounts	$ -
Cash - savings accounts	-
Certificates of deposit	-
Securities - stocks / bonds / mutual funds	-
Notes & contracts receivable	-
Personal property (autos, jewelry, etc.)	-
Retirement Funds (eg. IRAs, 401k)	-
Real estate (market value)	-
Other assets (specify)	-
Other assets (specify)	-
Total Assets	$ -

Liabilities	Amount in Dollars
Current Debt (Credit cards, Accounts)	$ -
Notes payable (describe below)	-
Taxes payable	-
Real estate mortgages (describe)	-
Other liabilities (specify)	-
Other liabilities (specify)	-
Total Liabilities	$ -
Net Worth	$ -

Signature: _____

Date: _____