



The World Trade Center Baltimore
401 E. Pratt Street
Baltimore, Maryland 21202

COMMERCIAL LEASE APPLICATION

Landlord / Lessor: _____

Location of Leased Premises: _____

Space #: _____ Square Feet: _____

Complete Legal Name to Appear on Lease: _____

Corporation: _____ LLC: _____ Partnership: _____ LLP: _____ Sole Proprietor: _____ Non-Profit: _____

Other (explain): _____ State in Which Entity Formed: _____

Year Formed: _____ Federal Tax Payer Identification No: _____

D/B/A to Appear on Lease: _____

Main Address or Home Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____

Address for Notices & Billing: _____

City: _____ State: _____ Zip Code: _____

Current Business Name (If Differs from Legal Name for This Application): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Fax: _____ Yrs. in Business: _____

Name of Person(s) Who Will Sign Lease:

Person 1: _____ Title: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State of Issuance: _____

Married (check): _____ Single (check): _____ Spouse's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____

Person 2: _____ Title: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State of Issuance: _____

Married (check): _____ Single (check): _____ Spouse's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Mobile Phone: _____ Fax: _____



Other Business Locations:

Location 1: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

Location 2: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____

Names of Person(s) who will Guarantee Lease:

Person 1: _____ Title: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ State of Issuance: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Mobile Phone: _____ Fax: _____

Person 2: _____ Title: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ State of Issuance: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Mobile Phone: _____ Fax: _____

Credit References (Business / Personal):

Name: _____ (circle one): Business Personal
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____

Name: _____ (circle one): Business Personal
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____

Name: _____ (circle one): Business Personal
Street Address: _____
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Contact Name: _____ Phone Number: _____

Name: _____ (circle one): Business Personal
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____



Bank References (Checking / Savings Accounts):

Name: _____ Account Type: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Account Number: _____

Name: _____ Account Type: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Account Number: _____

Credit Card Information:

Issuer: _____ Card Number: _____
Approximate Balance: \$ _____ Payments: \$ _____

Issuer: _____ Card Number: _____
Approximate Balance: \$ _____ Payments: \$ _____

Issuer: _____ Card Number: _____
Approximate Balance: \$ _____ Payments: \$ _____

Other Creditors Not Already Listed (Auto Loans / Mortgages, Etc):

Creditor Name: _____ Type of Loan: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Balance: \$ _____ Monthly Payment: _____

Creditor Name: _____ Type of Loan: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Balance: \$ _____ Monthly Payment: _____

Creditor Name: _____ Type of Loan: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Balance: \$ _____ Monthly Payment: _____

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ADDITIONAL COMMENTS:



ATTACH COPIES OF THE FOLLOWING DOCUMENTATION AS APPLICABLE:

Check Attached Items or Mark N/A

- 1) Applicant's Current Balance Sheet and Income Statement _____
- 2) Applicant's most recent two years' Federal Tax Returns _____
- 3) Personal Financial Statement (see attached form) _____
- 4) Guarantor's most recent two years' Federal Tax Returns _____
- 5) Credit Check Authorization (see attached form) _____

CONDITIONS AND INFORMATION

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 to WTC/MPA. and _____, its agents or associates to have access and obtain information on its present and past history and any information relating to same.

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.

A Credit Check Authorization Form (see attached) is required, in addition to this application, if the prospective Tenant is an individual or if a Guarantor is coupled with the proposed lease. At the time of completion of this application, a Credit Check Authorization is _____ or is not _____ required. Landlord reserves the, right after reviewing the initial application, to later require the completion of a Credit Check Authorization Form if a Guarantor becomes a requirement of the 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.

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LANDLORD USE ONLY

Annual Costs:

Rent: \$ _____ CAM: \$ _____ RET: \$ _____ Other: _____



Credit Check Authorization

I/We the undersigned hereby authorize WTC/ MPA, and/or any of its affiliates, partners, subsidiaries, employees or designees (hereinafter collectively referred to as "WTC/MPA"), to make any credit inquiries that WTC/MPA 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 WTC/MPA may deem necessary now or in the future, in connection with the tenancy contemplated.

Applicant

Spouse (If Applicable)

(Print company name, if applicable)

(Print company position held, if applicable)

By: _____
(Signature)

Print Full
Legal Name _____

By: _____
(Signature)

Print Full
Legal Name _____

Its: _____
(Print company position held, if applicable)

Its: _____
(Print company position held, if applicable)

Street Address

Street Address

City, State, ZIP

City, State, ZIP

Date of Birth

Date of Birth

Driver's License Number

Driver's License Number

FEIN or Social Security Number
(Attach copy of Social Security Card)

FEIN or Social Security Number
(Attach copy of Social Security Card)

Dated: _____

Dated: _____

Personal Financial Statement

Name: _____

Statement of Financial Conditions as of: _____

Balance Sheet (attach additional schedule as needed)

<i>Assets</i>	<i>Dollars</i>	<i>Jt*</i>	<i>Liabilities</i>	<i>Dollars</i>	<i>Jt*</i>
Cash and Short-term Investments (Schedule A)			Outstanding Credit Cards Balances		
Stocks & Bonds (readily marketable) (Schedule B)			Taxes Payable		
Unlisted Securities (Schedule C)			Policy Loan (Life Insurance) (Schedule D)		
Notes Receivable & Accounts Receivable			Mortgage & Obligations Due (Schedules F & G)		
Cash Surrender Value-Life Insurance (Schedule D)			Notes & Accounts Payable (Schedule H)		
General/Ltd. Partnership Interests (Schedule E)			Other Liabilities (list):		
Retirement Accounts					
Personal Property					
Automobiles					
Real Estate-Personal Residences (Schedule F)					
Real Estate-Investments (Schedule G)					
Direct & Partnership Interests (Schedule H)					
Other Assets (list):					
TOTAL ASSETS			TOTAL LIABILITIES		
			NET WORTH (total assets - total liabilities)		

Income Statement

<i>Annual Income</i>	<i>Applicant</i>	<i>Co-App.</i>	<i>Annual Expenses</i>	<i>Applicant</i>	<i>Co-App.</i>
Salary			Home Mortgage (Principal & Interest)		
Bonus and Commissions			Loan Payments (including other R/E)		
Interest and Dividends			Income Tax (State & Federal)		
Alimony, Separate Maintenance, Child Support**			Planned or Required Investments		
Capital Gains			General Living Expenses		
Real Estate Income			Other Expenses (list):		
Other Income (list):					
GROSS INCOME			TOTAL EXPENSES		

*Please check if jointly held.

**Alimony, separate maintenance, and/or child support income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

Personal Financial Statement

Schedule A: Cash & Short-term Investments (certificates of deposit, commercial paper, money market funds, etc.)

Name of Institution	Savings Accts (\$ amount)	Checking Accts (\$ amount)	Other Short-term Investments (type and \$ amount)	Total	

Schedule B: Stocks and Bonds (include U.S. Government and Marketable Securities)

Name of Shares or Face Value (Bonds)	Description	Market Value	Margin? (Y/N)	Restricted? (Y/N)	

Schedule C: Unlisted Securities

Name of Security	Description	Market Value	

Schedule D: Life Insurance Carried (include individual and group insurance)

Name of insurance company	Owner of Policy	Beneficiary	Face Value	Policy Loans	Cash Surrender Value	

Schedule E: General/Ltd. Partnership Interests

Name of company	Type of business	State of Incorporation	% Ownership	Value of Ownership Interest

Schedule F: Real Estate Personal Residences

Property Address	Value	Mortgage Payable

Schedule G: Real Estate Investments

Property Address	Value	Mortgage Payable	Annual Cash Flow

Schedule H: Direct & Partnership Interests

Name of company	Type of business	State of Incorporation	% Ownership	Value of Ownership Interest