

## **Tenant Occupancy & Use Information Form**

Please print and answer each question completely. If question is not applicable, write N/A. All information provided is privileged and confidential. Location and Unit Applying For:\_\_ **SECTION A - COMPANY INFORMATION** 1. Company Name (include DBA's and FNA's)\_\_\_\_\_\_ 2. Current Street Address \_\_\_\_\_State\_\_\_\_\_Zip Code\_\_\_\_\_ Current Landlord \_\_\_\_\_ Length of Occupancy\_\_\_\_ Current Landlord Phone Reason for moving\_\_\_ Select one: □ Corporation □ LLC □ Partnership 3. ☐ So le proprietorsh ip 4. If corporation or LLC, list date and State(s) of filing with the Secretary(s) of State Federal Tax I.D. Number: SSN FED TAX ID 5. 6. Date Business Began \_\_\_\_\_ 7. Specific Use of Premises and Description of Business 8. Name of Parent Company (If Applicable) Phone Address of Parent Company (If Applicable) 9. Please list any and all other businesses to be conducted (and/or business names to be used) SECTION B - OFFICER/PARTNERSHIP/OWNER INFORMATION Please give complete information for all officers/partners/owners - Use additional paper if necessary. Full Name Home Address City, State & Zip

Social Security Number

Date of Birth

Home Phone

	uto Driv	ers License Numb	er	Auto License Number	
Do you 🗖 0 W N	□ RENTyour current h	ome ?			
Long					
Previous Address	3				
City	State	e Zi <sub>I</sub>	)	How Long	
b. (If multiple partn	ners)			-	
Full Name		ne Address		City, State & Zip	
Home Phone	Soci	ial Security Numbe	er	Date of Birth	
Description of A	uto Driv	vers License Numb	er	Auto License Number	
Do you 🗖 0 W N	□RENT your current ho	ome ?			
Long					
Previous Address	3				
City	State	e Zip	)	How Long	
In case of emergeno	cy, please contact				
Phone Number		Relationship			
		Phone Number		Relationship	
		Phone Number	Rela	tionship	
Or	S FINANCIAL INFO			nal paper if necessary)	
Or	S FINANCIAL INFO	DRMATION (PI			
Or	S FINANCIAL INFO eferences Add	DRMATION (PI	ease use addition	nal paper if necessary)	
Or	S FINANCIAL INFO eferences Add	DRMATION (PI	ease use addition	nal paper if necessary)  Phone	
Or  FION C - BUSINES  Business Credit Re  Name  Name	S FINANCIAL INFO eferences Add	DRMATION (PI	ease use addition	nal paper if necessary)  Phone	

## SECTION D - BUSINESS DECLARATIONS (Please use additional paper if necessary)

1.	Has this business, its officers, partners, or owners ever been delinquent in payment of any financial obligation? (If yes, explain.)					
2.	Has this business, its officers, partners, or owners ever been a respondent in a non-payment or holdover proceeding, ejectment action or ever filed for bankruptcy? (If yes, explain.)					
SE	CTION E – GENERAL LEASE REQUIREMENTS					
1. 2. 3. 4. 5. 6. 7.	How many standard parking spaces do you need for automobile(s)?  Do you need parking for company vehicle(s) or truck(s)? Y/N (Explain)  Do you need overnight parking of automobile(s), vehicle(s) or truck(s)? Y/N (Explain)  How many people will be working in the office area?  How many people will be working in the warehouse area?  How many truck deliveries/shipments each week?  Do you use a fork lift or other materials handling devise? Y/N Gas: Y/N Electric: Y/N  Please describe how you will utilize the office area:					
9.	Please describe how you will utilize the warehouse area:					
10.	Will you be installing racks or shelving? Y/N (Explain)					
11.	. Please describe your waste products:					
12.	Are any noises, smells or odors associated with or produced by your use? Y/N (Explain)					
13.	List all substances (hazardous or non-hazardous) by type and brand name used, stored or produced by you:  a. Household cleaning substances such as hand soap, Drano, Bleach, etc.:					
	b. Degreasors/Acetone:					
	c. Lubricants, Solvents, Caustics, and Flammables:					
	d. Petroleum products, including but not limited to gasoline, fuel oil, kerosene, oils:  e. Other substances/chemicals/powders/gasses, by-products, etc., including water for resale or processing:					
14.	Please list all permits you currently hold for your business:					
15.	Please list all permits you require for operating at the location/unit you will be leasing from Brent:					
16.	Do your operations generate hazardous waste or nonhazardous waste that require off-site disposal?  Y/N (Explain)					
17.	If the answer to question 16 is yes, identify the companies you use to transport the waste, identify the disposal facilities you use, and provide copies of the most recent manifests for each type of waste.					

18.	Do you store materials in d Y/N (Explain)						
19.	regulation, guideline or ord		ave violated any environmental, health or safety law,				
20.	Please provide copies of Safety Data Sheets (formerly known as Material Safety Data Sheets) for all substances used, stoor produced by your business that require such data sheets.						
21.	21. Please list all equipment you will be using in the warehouse area:						
22.	. Do you need to mount any equipment or materials outside of your space (including on the roof)?  Y/N (Explain)						
23.	3. Do you need an exhaust fan(s) gas or air piping, water supply, waste line in the warehouse?  Y/N (Explain)						
24.	Does your operation involv	re the use of hand or power tools? Y	/N (Explain)				
		CONSENT TO CR	EDIT CHECK				
1/33/	To.	the	undersigned applicant(s) authorize landlord, BrentMako Real				
Esta	e,ate Group, or its agents or af	iliates to order and review my/our o	r the company's credit and criminal history and investigate the				
			further authorize all banks, employers, creditors, credit card				
			Landlord any and all information concerning my/our credit.				
I/W	e understand that information	n that does not verify or cannot be v	rerified may result in this application not being approved.				
Sign	ned:		Date:				
Ü	Name	Title					
Sign	ned:		Date:				
	Name	Title					