



BUSINESS CENTER RENTAL APPLICATION

1. Business Information

Legal Business Name: _____

DBA (if applicable): _____

Type of Business: _____

Years in Operation: _____

Federal EIN: _____

Business Phone: _____ Business Email: _____

Business Website: _____

2. Business Address (Current or Previous)

Street Address: _____

City: _____ State: _____ Zip: _____

3. Owner / Principal Information

Full Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Driver's License #: _____ State: _____

4. Financial Information

Bank Name: _____

Average Monthly Revenue: _____

Have you ever filed bankruptcy? Yes / No

Have you ever been evicted from a commercial space? Yes / No

5. Space Request Details

Type of Space Requested (Office / Virtual Office / Suite #): _____

Desired Move-In Date: _____

Requested Lease Term (Months/Years): _____

Number of Employees: _____

6. Emergency Contact

Name: _____

Relationship: _____

Phone: _____

7. Certification & Authorization

I certify that the information provided in this application is true and complete.

I authorize the Business Center to verify information provided, including credit and background checks if necessary.

Applicant Signature: _____

Print Name: _____

Date: _____