

Hammer-Hewson Associates

Commercial Lease Application

Please provide all of the information requested below. Incomplete information can delay the processing of your application.
Print and fax the completed application to our leasing staff at (805) 644-2853.

OCCUPANT(S)

Sole Prop.

Partnership

Corporation

COMMERCIAL RENTAL HISTORY (No Less Than One Year)

BANKING REFERENCE

OTHER INFORMATION - PRINCIPAL NO. 1

OTHER INFORMATION - PRINCIPAL NO. 2

CREDIT REFERENCE

AUTHORIZATION

By downloading and faxing the completed lease application, I authorize the use of the information and contacts provided to complete a credit, reference, and/or background check. I understand that false or lack of information may result in the rejection of this application.

Signature Applicant No. 1

Date

Signature Applicant No. 2

Date