



LEASE CREDIT APPLICATION

Office Space, L.L.C.
1142 W. Flint Meadow Dr. • P.O. Box 121 • Kaysville, UT 84037-0121
(801) 927-3020 • Fax (801) 660-4668

For the purpose of obtaining credit, we submit the following to you for consideration:

(Please Type or Print Information)

Company Name: _____ Phone number _____

DBA: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

SHIPPING ADDRESS _____

City: _____ State: _____ Zip: _____

Federal I.D. # _____ Type of Business: _____

Company Email Address: _____

Website: _____

Names and titles of Officers or Partners:_(Fill in page 2)_ Corporation, Individual or Partnership? _____

Dun & Bradstreet Account #: _____ Dun & Bradstreet Rating: _____

How long in business? _____ How long at present address? _____

Do you Own or Rent? _____ Monthly rent \$ _____

REFERENCES: BANK (Fill in All Blanks Completely)

Bank Name: _____ Acct# _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Bank Name: _____ Acct# _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

REFERENCES: TRADE (Fill in All Blanks Completely)

Company Name: _____ Acct# _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Company Name: _____ Acct# _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Company Name: _____ Acct# _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Financial Statement & Two Years Tax Returns: Enclosed Will be forwarded on (Please give date) _____

AGREEMENT: Applicant agrees that extension of credit by Lessor shall be subject to and in consideration of the following:

- 1. Terms and conditions are stated on the lease agreement. All amounts are due in accordance with said stated terms.
2. Past due balances are subject to a service charge of a maximum permitted by state law and not less than \$1.00.
3. Should it be necessary to assign the account balance to a licensed collection agency or attorney for legal action, all subsequent collection charges and legal fees shall be paid by the applicant.
4. The undersigned agrees to the terms and conditions stated herein.
5. The undersigned hereby authorizes the above mentioned banks and companies to release the information requested.
6. The undersigned hereby absolutely, unconditionally and personally guarantee the payment of all indebtedness and obligations of whatever nature to Office Space.

Date _____

Name (print) _____

Signature _____ Title _____

Signing Person Must Be An Officer , or Application is Not Valid



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Names and titles of Officers or Partners:

Principal Name: _____ % of ownership: _____ Title: _____

Home Phone: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Principal Name: _____ % of ownership: _____ Title: _____

Home Phone: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Principal Name: _____ % of ownership: _____ Title: _____

Home Phone: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Principal Name: _____ % of ownership: _____ Title: _____

Home Phone: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Principal Name: _____ % of ownership: _____ Title: _____

Home Phone: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____