

RFF Properties
P.O. Box 226
Hagerstown, MD 21741
301-790-0002

TENANT CREDIT APPLICATION

As a part of our normal review of prospective tenants, we require the following information. In order to expedite the approval of your Lease, please provide the information requested below and attach financial statements for your company's last two fiscal years plus the most current financial statements.

COMPANY INFORMATION:

Name of Company: _____

d/b/a: _____

Present
Address:

Present Phone: _____ Present Fax: _____

Federal Tax ID#: _____

Type of Business: _____

Has your Company ever filed for bankruptcy? If "yes", explain:

Is your Company a defendant in any lawsuits or legal action? If “yes” explain:

.
. .
.

COMPANY STRUCTURE:

_____ Corporation (please also complete Attachment A)
_____ Partnership (please also complete Attachment B)
_____ Sole Proprietorship (Please also complete Attachment C and provide a personal financial statement)

TENANT’S CONTACTS WITH LANDLORD:

1. Name: _____
Title: _____
Phone #: _____

2. Name: _____
Title: _____
Phone #: _____

CREDIT/TRADE REFERENCES:

1. Name of Creditor: _____
Address: _____
Phone: _____
Contact: _____

2. Name of Creditor: _____
Address: _____
Phone: _____
Contact: _____

PRESENT LANDLORD:

Name: _____

of years at this address: _____

Address:

May we contact them?

Landlord contact: _____

Phone: _____ Fax: _____

I certify that all information on this statement and any attachments hereto (including any financial statements) represents the current and continuing financial condition of the above business in a true, accurate and complete manner to the best of my knowledge, information and belief. I authorize Tyler Donegan, inc. to investigate any and all sources of credit information and to seek information from credit bureaus and agencies, and from the references listed herein.

Signature: _____

Title: _____

Name: _____

Date: _____

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CREDIT APPLICATION Attachment A

CORPORATIONS:

Officers:

Name: _____
Title: _____
Signing Authority (Yes or No): _____

Name: _____
Title: _____
Signing Authority (Yes or No): _____

Name: _____
Title: _____
Signing Authority (Yes or No): _____

Directors:

Name: _____
Title: _____
Signing Authority (Yes or No): _____

Name: _____
Title: _____
Signing Authority (Yes or No): _____

Name: _____
Title: _____
Signing Authority (Yes or No): _____

State of Registration: _____

Date of Incorporation: _____

Tax Identification #: _____

Individuals other than Officers or Directors with authority to execute documents to bind the corporation:

Name: _____

Title: _____

Name: _____

Title: _____

Name: _____

Title: _____

Name: _____

Title: _____

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CREDIT APPLICATION Attachment B

PARTNERSHIPS

Number of Partners in Firm: _____

Type of Partnership: General Limited

Are they all equal partners: _____

If limited, who are the General Partners?

Please state names and, if not equal partners, percentage ownership:

Name: _____

Percentage Ownership: _____

Address: _____

Signing Authority (Yes or No):

Name: _____

Percentage Ownership: _____

Address: _____

Signing Authority (Yes or No):

Name: _____

Percentage Ownership: _____

Address: _____

Signing Authority (Yes or No):

Name: _____

Percentage Ownership: _____

Address: _____

Signing Authority (Yes or No):

State of Registration: _____

Tax I.D. Number: _____

Individuals other than General Partner with authority to execute documents to bind the Partnership:

Name: _____
Title: _____

Name: _____
Title: _____

Name: _____
Title: _____

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**CREDIT APPLICATION
Attachment C**

SOLE PROPRIETORSHIP:

Owner's Name: _____

Title: _____

Home
Address: _____

Home Phone: _____

Cell Phone: _____

Business Phone: _____

Drivers License #: _____

State of Drivers License: _____

Social Security #: _____

Date of Birth: _____