



Professional Property Management
 100 W Franklin
 Minneapolis, MN 55404
 PH 612-871-4545

Commercial Rental Application

Completed forms may be dropped off at our office, faxed to us at:
 612-871-4747 or emailed to dana@spaceunlimited.com

Current Business Information

Business Name: _____ Years in Business: _____

Type of Business & Use of Space: _____ Location Interested in: _____

Current Address: _____
 Street City State Zip Code

Business Phone: _____ Bus. Cell: _____ Bus. Email: _____

Business Web Address: _____ Rented From: _____ to _____ Monthly Rent: _____

Present Landlord: _____ Phone Number: _____

Reason Leaving: _____

Previous Address: _____
 Street City State Zip Code

Rented From: _____ to _____ Monthly Rent: _____

Previous Landlord: _____ Phone Number: _____

Reason Leaving: _____

Personal Information

Name of Owner: _____
 First MI Last

SSN#: _____ - _____ - _____ DOB: _____ / _____ / _____

Home Address: _____
 Street City State Zip Code

Cell Phone : _____ Business Phone : _____ HomePhone: _____

E-Mail: _____

Name of Owner: _____
 First MI Last

SSN#: _____ - _____ - _____ DOB: _____ / _____ / _____

Home Address: _____
 Street City State Zip Code

Cell Phone: _____ Work Phone: _____ Home Phone: _____

E-Mail: _____

Have You or Your Business Ever?

Been served with an eviction notice? YES NO Been Arrested for any Reason? YES NO Filed for bankruptcy? YES NO discharged: _____

Refused to pay rent when due? YES NO If YES please explain (include dates) _____

With my signature I authorize Space Unlimited to run my credit and verify the above information. With submission of application I agree that 1 month rent is due to serve as a Security Deposit. At the time of signing the lease, I agree to pay 1st month's rent.

 Name Date

 Name Date