



CREDIT APPLICATION FOR COMMERCIAL LEASE

[1. Complete Form on Website 2. Print Form 3. Fax or Mail to Diablo Holdings (See Below)]

Diablo Holdings, Ltd.

P.O. Box 680 Alamo, CA 94507

Property Management Company

www.DiabloHoldings.com

Office Phone: (925) 837-3665

Office Fax: (925)837-0688

PROPERTY ADDRESS: _____ **SUITE#** _____

Need One Application for Each Owner (Except Corporation)

BUSINESS NAME:		TYPE OF BUSINESS ENTITY
BUSINESS OWNER # 1 NAME:		Sole Proprietor <input type="checkbox"/>
BUSINESS OWNER # 2 NAME:		Partnership <input type="checkbox"/>
BUSINESS OWNER # 3 NAME:		LLC <input type="checkbox"/>
		Corporation <input type="checkbox"/>
YEAR BUSINESS STARTED:	TIN:	Specify if Other <input type="checkbox"/>

BUSINESS ADDRESSES – List All Business Addresses for Past 5 Years. Start with Present

STREET ADDRESS	CITY	STATE	ZIP CODE	LANDLORD'S NAME & PHONE NUMBER	DATE IN/OUT	MONTHLY RENT

PERSONAL DATA - BUSINESS OWNER #1 Business Owner #2 & #3 (If Applicable) to Complete Separate Application

FULL NAME: FIRST – MIDDLE – LAST	SOCIAL SECURITY NUMBER	DRIVERS LICENSE	STATE
() _____ Home Phone	() _____ Cell Phone	() _____ Work Phone	BIRTH DATE (MO/DA/YEAR) _____ EMAIL ADDRESS _____

RESIDENCE ADDRESS - BUSINESS OWNER #1 (OWN RENT)

STREET ADDRESS	CITY	STATE	ZIP	DATE IN/OUT	\$ RENT/MTG	MORTGAGOR/LANDLORD

EMPLOYMENT HISTORY - BUSINESS OWNER #1 - List All Employers for Past 5 Years. Start with Present

COMPANY NAME	COMPANY ADDRESS	SUPERVISOR NAME & PHONE NUMBER	INDICATE DATES	MONTHLY INCOME

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BANKING INFORMATION - BUSINESS AND BUSINESS OWNER #1 PERSONAL

(A) - APPLICANT OR (B) - BUSINESS	BANK, CREDIT UNION OR S&L NAME	TYPE OF ACCOUNT (Checking or Savings)	PHONE	ACCOUNT NUMBER	DATE OPENED	PRESENT BALANCE

PERSONAL REFERENCES - BUSINESS OWNER #1 (MINIMUM OF 2)

FULL NAME	RELATIONSHIP	ADDRESS - CITY - STATE	PHONE

APPLICANT TO ANSWER ALL QUESTIONS, BOTH PERSONALLY AND ON BEHALF OF BUSINESS	APPLICANT	BUSINESS
HAS ANY CIVIL JUDGMENT BEEN ENTERED AGAINST YOU FOR COLLECTION IN THE PAST 10 YEARS?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
HAVE YOU FILED FOR BANKRUPTCY IN THE PAST 10 YEARS?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
HAVE YOU EVER HAD ANY CREDIT PROBLEMS?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
HAVE YOU EVERY BEEN EVICTED OR REFUSED TO PAY RENT FOR ANY REASON?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
HOW DID YOU HEAR ABOUT OUR VACANCY? Sign/Craig's list/Friend/Other _____		
IF ANY QUESTION ABOVE HAS BEEN ANSWERED "YES", PLEASE EXPLAIN: _____ _____ _____ _____ _____ _____		

The undersigned Applicant hereby offers to rent the Property described above. Applicant has no rights to said property until a Rental Agreement is duly executed **after** the approval of this Application.

A non-refundable fee of **\$35.00** to process this Application, payable to **DIABLO HOLDINGS, LTD.**, must be given by Applicant, when this application is turned in for processing.

Applicant represents all information in this Application to be true and accurate and authorizes Diablo Holdings, Ltd., and its employees and agents to verify said information in person, by mail, phone, fax, or otherwise, to help determine Applicant's rental, credit, employment and financial history and character standing Applicant releases Diablo Holdings, Ltd., and any of their employees and agents, any Credit Reporting Agencies, and specifically the U.D. Registry, Inc. and their employees and agents and any and all other firms or persons investigating or supplying information, from any liability whatsoever concerning the release and/or use of said information and further, will defend and hold them all harmless from any suit or reprisal whatsoever. All holders, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning Applicant and in so doing, will be acting on Applicant's behalf at Applicant's request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original. Fraudulent information herein will result in automatic denial of application.

_____ **X** _____
Dated **Applicant's Signature** **Applicant's Name PRINTED**

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FOR INTERNAL USE ONLY:

RESIDENCE & REFERENCES	VERIFIED BY	EMPLOYMENT & CREDITORS	VERIFIED BY
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

Notes:

