



## TENANT APPLICATION

**Date of Application:** \_\_\_\_\_

**Landlord Name:** Dash Development Team, LLC d/b/a The Paddock

**Property Address:** 4855 Windward Parkway, Milton, GA 30004

**Unit Number:** \_\_\_\_\_ **Square Feet:** \_\_\_\_\_

### Applicant

Business Name \_\_\_\_\_

D/B/A Name (if applicable) \_\_\_\_\_

Type of Entity [Corporation/LLC/Partnership/Sole Proprietorship/Other] \_\_\_\_\_

Date of Formation \_\_\_\_\_ State of Formation \_\_\_\_\_

Federal Employer Identification Number \_\_\_\_\_

Current Office Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Length at This Location \_\_\_\_\_

Services Performed at this location \_\_\_\_\_

Number of Years in Business \_\_\_\_\_

Estimated Gross Annual Revenue in 2023 \$ \_\_\_\_\_

### Name of Person Signing Lease/Individual Owner

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_



Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License State of Issue \_\_\_\_\_

**Personal References**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Lease History**

(Provide at least 2 years of history)

Current Address \_\_\_\_\_ Unit No. \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Dates of Occupancy: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason For Leaving \_\_\_\_\_

Check one:  Own  Rent  Other (specify) \_\_\_\_\_

Monthly Rent/Mortgage Amount \$ \_\_\_\_\_

Landlord/Mortgage Company \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Previous Address \_\_\_\_\_ Unit No. \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Dates of Occupancy: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason For Leaving \_\_\_\_\_

Check one:  Own  Rent  Other (specify) \_\_\_\_\_

Monthly Rent/Mortgage Amount \$ \_\_\_\_\_

Landlord/Mortgage Company \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_



Has the applicant or any principal, officer, or partner been evicted? (Check one)  Yes  No  
If yes, provide explanation \_\_\_\_\_

Has the applicant or any principal, officer, or partner breached a lease agreement? (Check one)  Yes  No  
If yes, provide explanation \_\_\_\_\_

Has the applicant or any principal, officer, or partner been sued for nonpayment of rent? (Check one)  Yes  No  
If yes, provide explanation \_\_\_\_\_

Has the applicant or any principal, officer, or partner declared bankruptcy? (Check one)  Yes  No  
If yes, provide explanation \_\_\_\_\_

**Additional Documentation Requested (as Applicable)**

- Tax returns (business and/or personal) – last year filed

**Additional Comments**

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**Authorization**

Applicant authorizes the verification of all statements and information provided in this application including bank accounts, credit history and account details, lease history and any other relevant information necessary for Landlord to evaluate this application. Applicant gives full consent to Landlord to have access and obtain any and all information concerning Applicant's current and past credit for the use and review of this application. If Applicant has



provided any false or incomplete information in this application, Landlord may reject this application and/or terminate the commercial lease agreement.

Applicant certifies that all information and statements provided in this Application are true, correct and complete.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Representative Name \_\_\_\_\_ Title \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Representative Name \_\_\_\_\_ Title \_\_\_\_\_

**LANDLORD: Dash Development Team, LLC d/b/a The Paddock**

By: \_\_\_\_\_ Date \_\_\_\_\_  
Dr. Erik S. Atkinson, DDS