**THE TRADES MILL LLC**

6 Chestnut Street, Amesbury MA 01913

**Commercial Tenant Application**

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| **Tell Us About Yourself:** | | |
| First Name: | Middle Name: | Last Name: |
| Home Address: | City: | State/Zip Code: |
| Daytime Phone Number: | Evening Phone Number: | Email Address: |
| Date of Birth: | Driver's License Number: | State/Expiration Date: |
| Emergency Contact Name: | Address: | |
| Relationship: | Home Phone Number: | Cell Phone Number: |

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| **Business Information:** | | |
| Business Name: | Previous Business Address: | |
| Business Phone Number: | Business Email: | Business Website Address: |
| Years in Business: | Annual Revenue: | Number of Employees Onsite: |
| Co-Occupant Names: | Type of Business (trade, retail, manufacturer, etc): | FEIN # / SS #: |
| Please List Any Specialized Equipment Used For Your Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Please List Any Sounds or Smells associated with your occupancy whether as personal preference or vocational i.e. Hammering, Music, Foot Stomping, Yelling, Incense Burning or Percussive Equipment:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **\*\*\*Overnight parking of vehicles is prohibited without prior approval\*\*\***  **List All Vehicles Used For Your Business Including Personal Vehicles:**  Make:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Make:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Make:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

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| **Financial Information:** | | |
| Self-Employed: | Length of Self-Employment | Gross Annual Income: |
| And/Or Current Employer: | Employer Address: | Gross Annual Income: |
| Position/Title: | Supervisor: | Employer Phone Number: |

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| **Please Complete The Following Information:** | **Please Provide Explanations On Other Side To Any “YES” Answer:** |
| Have you had any charges pending against you for any criminal offense? | Applicant \_\_\_\_ NO \_\_\_\_ YES  Occupants\_\_\_\_ NO \_\_\_\_ YES |
| Have you ever been convicted of, pleaded guilty to or “Sufficient Evidence” to any criminal offense? | Applicant \_\_\_\_ NO \_\_\_\_ YES  Occupants\_\_\_\_ NO \_\_\_\_ YES |
| Have you ever been subject to or party to an eviction, judgment, bankruptcy or foreclosure? | Applicant \_\_\_\_ NO \_\_\_\_ YES  Occupants\_\_\_\_ NO \_\_\_\_ YES |

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| **Credit & Release of Information:** |
| With my signature below, I hereby authorize The Trades Mill LLC or it's authorized representative, in connection with this application for tenancy, to obtain a consumer report, including but not limited to, credit records, criminal background checks, and employment references. |

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| **Please Read Carefully And Sign Below:** |
| Correct Information: Applicant hereby represents that all of the above statements are true and complete. Applicant hereby authorizes verification of the above information and release from all liability all persons and corporations requesting or supplying information. Applicant acknowledges that false, incomplete, or misleading information herein may constitute grounds for rejection of this application, termination of right of occupancy of all occupants under a lease and/or forfeiture of deposits and fees, and may constitute a criminal offense under the law. |

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| **Applicant's Signature:** | **Date Completed:** | **Date Received/Receiver's Initials:** |