

METRO RESOURCE INVESTMENT & MANAGEMENT, INC.

4069 Joseph Dr, Suite B3, Waukegan, IL 60087

Phone: 847-775-2525 Fax: 847-775-2828

TENANT APPLICATION

Address of Premises applied for: _____

Premises to be used for: _____

By:

Company President/ Applicant Name: _____

Home Address: _____
STREET CITY ZIP

Date of Birth: _____ Social Security #: _____ Home Phone: _____

Company Name: _____

Company is

Please circle applicable category: an Illinois Corporation not incorporated State of ____ Corporation

Present Business Address: _____
STREET CITY ZIP

Business Phone: _____ Business Fax: _____

Previous Business Address: _____
STREET CITY ZIP

Current Landlord: _____ Current Landlord Phone: _____

Business Reference: _____

Address & Phone: _____

Bank & Checking Acct. No.: _____

Persons to be called in Emergency:

Name: _____ Address: _____ Phone: _____

Tenant Application

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I/We represent to Metro Resource Investments & Management, Inc. as agent for owner and operator of the property that I/we have read and completed this entire application. I/We further represent that all of the above information is true and correct and give permission for a credit check and verification of the above given information. This application is subject to approval by Metro Resource Investments & Management, Inc. and the owner prior to the submission of any and all lease proposals and/or leases. I/We also understand this is **NOT A LEASE**.

Applicant Signature: _____

Co-applicant Signature: _____
(if applicable)

Date: _____

PICTURE ID of APPLICANT:
(insert copy of Driver's License)

Please attach a personal/company financial statement and fax to 847-775-2828. Thank you.