



1060 East 33rd Street
Hialeah, Florida 33013
(305) 693-3500 Phone
(305) 693-3497 Fax
www.sharpeproperties.com

APPLICANT / PERSONAL GUARANTOR:

Building Interested In _____ or Address _____

Your Company Name _____ Website _____

First Name _____ Middle Initial _____ Last Name _____

S.S.N. _____ Date of Birth _____ / _____ / _____ E-mail _____

Driver License Number _____ State Issued Driver License (*attach copy*) _____

Home Address _____ City _____ St _____ Zip _____

Phone # _____ Fax # _____ Mobile # _____

How Did You Find Us?: Sign on Street Social Media Email Other _____

Name of Website _____ Name of Broker _____

PRIOR/ CURRENT BUSINESS:

Please Fill Out Status of Business: Start-up Prior Business from _____ years ago Current Business of _____ years

Name of Business _____ Website: _____

Business Address _____ City _____ St _____ Zip _____

Phone # _____ Fax # _____ Mobile # _____

Size occupied _____ Name of Landlord _____ Landlord's Phone # _____

Description of Business Activities _____

BUSINESS REFERENCE:

Company Name _____ Phone # _____ E-mail _____

Address _____ City _____ St _____ Zip _____

BANK REFERENCE:

Name of Bank _____ Contact Name _____

Address _____ City _____ St _____ Zip _____

Phone # (_____) _____ Fax # (_____) _____ Account # _____

I/We confirm that all the information I/we have supplied is true and correct. I/we understand that I/we can be turned down for the property if I/we have negative or falsified any information on this application. I/we hereby authorize the Landlord to verify and/or obtain information for both screening and collection purposes, through any available sources. I understand that subsequent consumer reports may be obtained with respect or in connection with the rental or lease for which application was made. This application does not constitute a contract, lease, or agreement for space. I hereby expressly release Landlord, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state, and/or federal government agencies, including without limitation, various law enforcement agencies.

BY: _____ DATE _____
(Authorized signature)

(Print Name)