



2655 First Street, Suite 250 • Simi Valley, CA 93065

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www.My-SuiteOffice.com

CONFIDENTIAL CLIENT APPLICATION

Full Company Name \_\_\_\_\_

Type Of Entity:  Proprietorship  Partnership  Corporation  Other \_\_\_\_\_

If Incorporated: State of Incorporation \_\_\_\_\_ Year of Incorporation \_\_\_\_\_ Federal Tax ID: # \_\_\_\_\_

Type of Business \_\_\_\_\_ Date Company Was Established \_\_\_\_\_

Company Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Billing Address (If Different) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bank \_\_\_\_\_ Address \_\_\_\_\_

Account # \_\_\_\_\_ Phone \_\_\_\_\_

Applicants Full Name \_\_\_\_\_ Phone # \_\_\_\_\_ DOB \_\_\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Applicant Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Key Management, Members/Owners

Name: \_\_\_\_\_ % Ownership \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name: \_\_\_\_\_ % Ownership \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name: \_\_\_\_\_ % Ownership \_\_\_\_\_ SSN \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Trade References, Addresses And Phone Numbers:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Who Will Occupy Office(S)? \_\_\_\_\_

How Did You Hear About Us? \_\_\_\_\_

I CERTIFY That Answers Given Herein Are True And Complete To The Best Of My Knowledge. I Authorize Investigation Of All Statements Contained In This Application For Tenant Screening As May Be Necessary In Arriving At A Tenant Decision, I Understand That The Landlord May Terminate Any Rental Agreement Entered Into For Any Misrepresentations Made Above. I/We Authorize Our Bank And Trade References To Furnish You With Any Information Necessary To Complete Your Evaluation Of Our Credit History.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_