

# NOTICE TO CONSUMER

**(PLEASE COMPLETE THOROUGHLY, COMPLETELY, AND LEGIBLY)**

Thank you for seeking a rental or leasing relationship with our company Ashwill Investments.

In compliance with State and Federal laws, we are hereby notifying you that a CONSUMER REPORT, and/or INVESTIGATIVE CONSUMER REPORT may be obtained for use in evaluating our decision to accept your personal guarantee for the rental or lease of our property.

Inquiries may be made in considering your application, and the ensuing report may contain public/semi-public or private information, identification information, credit information, or other information, which could adversely affect your potential for an association with us. The report will only be obtained, according to your written instruction(s), below.

You have the right to make a direct written request to obtain copies of any reports, which may have been provided by one, or more of the following Consumer Reporting Agencies, which may have contributed to the compilation of the Consumer Report, and/or Investigative Consumer Report:

- |  |   |
|--|---|
| 1. EXPERIAN (Formerly TRW – www.experian.com)<br>701 Experian Pkwy<br>Dallas, TX 75013; or call:<br>1-888-397-3742 | 3. EQUIFAX (www.equifax.com)<br>P.O. Box 740241<br>Atlanta, GA 30374-0241; or call<br>1-800-685-1111  |
| 2. TRANSUNION (www.transunion.com)<br>2 Baldwin Place<br>Chester, PA 19022; or call:<br>1-800-916-8800             | 4. APSCREEN Consumer Relations<br>P.O. Box 1355<br>Newport Beach, CA 92663; or call<br>1-800-637-0223 |

## AGREEMENT AND CONSENT

**I have read this form completely, and I authorize you to obtain** a Consumer Report, or Investigative Consumer Report, per the outline of available information, above. **I also (by photocopy of this form) authorize Consumer Reporting Agencies**, related or unrelated firms and/or persons to release information in response to these inquiries, and release same from any and all liability in responding to such inquiries. I understand that I am authorizing this request in accordance with my rights under the Fair Credit Reporting Act, the Fair and Accurate Credit Transactions Act, and the Gramm-Leach-Bliley Act.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Personal Credit

Full Name (Printed): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth (mm/dd/yy): \_\_\_\_\_

Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

### COMPANY CREDIT

Company Name (Printed): \_\_\_\_\_

Federal ID Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**LEASE APPLICATION—Corporations, Sole Proprietors and Partnerships  
(Please Type)**

**PERSONAL AND EMERGENCY INFORMATION**

(All partners, sole proprietors, and personal guarantors of corporate leases are required to complete this section.)

First Name: \_\_\_\_\_ M.I. \_\_\_ Last Name: \_\_\_\_\_ Jr. \_\_\_ Sr. \_\_\_

Home Address: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

\_\_\_\_\_ Spouse's First Name: \_\_\_\_\_

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

Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Name of closest relative not living with you: \_\_\_\_\_

Their home address: \_\_\_\_\_

Bank and Branch (Checking Account): \_\_\_\_\_

Address: \_\_\_\_\_

Person to Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Account Number: \_\_\_\_\_ Average Balance: \_\_\_\_\_

Bank and Branch (Savings Account): \_\_\_\_\_

Address: \_\_\_\_\_

Person to Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Account Number: \_\_\_\_\_ Average Balance: \_\_\_\_\_

First Name: \_\_\_\_\_ M.I. \_\_\_ Last Name: \_\_\_\_\_ Jr. \_\_\_ Sr. \_\_\_

Home Address: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

\_\_\_\_\_ Spouse's First Name: \_\_\_\_\_

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

Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Name of closest relative not living with you: \_\_\_\_\_

Their home address: \_\_\_\_\_

Bank and Branch (Checking Account): \_\_\_\_\_

Address: \_\_\_\_\_

Person to Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Account Number: \_\_\_\_\_ Average Balance: \_\_\_\_\_

Bank and Branch (Savings Account): \_\_\_\_\_

Address: \_\_\_\_\_

Person to Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Account Number: \_\_\_\_\_ Average Balance: \_\_\_\_\_

**NAME AND PHONE NUMBERS OF TWO PERSONS TO CONTACT IN CASE OF AFTER HOURS EMERGENCY:**

Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

**LEASE APPLICATION—Corporations, Sole Proprietors and Partnerships  
(Please Type)**

**BUSINESS INFORMATION**

Name of Company: \_\_\_\_\_ Federal Id # \_\_\_\_\_

Business Address: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Year Company was formed: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Type of Company:            Sole Proprietorship [ ]    Partnership [ ]    Corporation with personal guarantee: [ ]

Current Landlord: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Bank and Branch: \_\_\_\_\_

Address: \_\_\_\_\_

Officer to Contact: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Account Number: \_\_\_\_\_ Average Balance: \_\_\_\_\_

**TRADE REFERENCES**

Name of Company: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Name of Company: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Name of Company: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Please attach copy of current financial statement or tax return. If not attached, please explain why: \_\_\_\_\_

The representations of fact contained in this application are considered part of the lease and are true and correct. If any information herein contained is discovered to be false or misleading, the lease made on the strength of this application may, at the option of the Lessor, be terminated at any time. The Lessor, and its representatives, are hereby granted permission to verify all information provided and to obtain any credit reports deemed necessary.

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Name Printed: \_\_\_\_\_ Name Printed: \_\_\_\_\_