HENRY T. GAGNON REALTY

P.O. BOX 431 TOPSFIELD, MASSACHUSETTS 01983-1613

> TEL. (978) 887 8856 FAX (978) 887 8856

Commercial Rental Application

NAME OF APPLICANT;		DATE OF BIRTH:
HOME PHONE:	CELL PHONE:	
SOCIAL SECURITY #:	EM	AIL ADDRESS:
PRESENT HOME ADDRESS:		
CITY STATE ZIP:		
COMPANY NAME:		
BUSINESS ADDRESS:		
CITY STATE ZIP:		
PHONE:	WEB ADDI	RESS;
NUMBER OF EMPLOYEES:	TYPE OF BU	ISINESS;
ANNUAL SALES/REVENUE:		
CURRENT BUSINESS LANDLORD:		
		DATES OCCUPIED:
verify all information provided by the appointment of the signature below represents that all informations to terminate any current or future before the signature of the signat	plicant and gives HTG Realty mation stated on this applicat lease with the applicant. All c	day of each month in advance. This rental application allows HTG Realty to consent to obtain a consumer credit report relating to the applicant. The ion is true. If any statement herein is made not true, HTG Realty reserves the commercial spaces are rented in "as in" condition unless repairs or G Realty and are stated in the lease agreement.
SIGNATURE		DATE