CRANESVILLE PROPERTIES LLC TENANT INFORMATION SHEET

Date:		
Name of Contact for Lessee		
Tax or Bus. ID#	-	
Email Address of Contact:		
Complete Business Name (If a Partnership, Partner must complete a Table 1)		(Corporation, LLC, Partner, D/B/A)
Current Address		
(Previous address if less than 2 years)		
Phone Number	_ Cell Phone	Alternate Phone
Emergency Contact If You Are Unavailable	::	
Phone #	Cell Phone #	
Name of Landlord if you rent		Phone #
Address of Landlord if you rent		
Name of Bank & Address:		
Acct. #(s):		
		er credit search by credit agencies of Riverfront ont Center, a Division of Cranesville Properties LLC,
SPACE WILL BE USED FOR	SPA	ACE SQUAREFOOTAGE:
Individual for Lessee	Authorized Signature	
TERMS OF LEASE:		
RENT: P.S.F MO.: Y COMMENCEMENT DATE TRASH REMOVAL WATER/SEWER SECURITY DEPOSIT LANDLORD WILL PROVIDE THE FOLL	JANITORIAL MAINTENANCE INSURANCE RENEWAL OPTIO	HIGH WATER DEMAND Y/N HIGH UTILITY DEMAND Y/N AFTER HOURS ENTRY Y/N
RESTRICTIONS/LIMITATIONS		

KEYS FOR THE POSTAL MAILBOXES ARE ISSUED AT

THE AMSTERDAM POST OFFICE