

222 East Market Street Indianapolis, IN 46204 (317) 634-9266 www.indycm.com

COMMERCIAL LEASE APPLICATION

Dear Potential Merchant,

Thank you for choosing to build a merchant relationship with Indianapolis City Market. It is our goal, through this application process, to help you identify and secure the ideal space, terms and tenancy agreement that will help you and your business to grow and prosper.

The following is a brief overview of the requirements, guidelines and verification processes utilized to evaluate your application.

PLEASE NOTE: <u>in addition to completing the attached application forms</u>, <u>the following information is required</u>:

- Completed Application (including the full legal business/company name with its state of incorporation and its Federal ID Number)
- Business Plan
- Marketing Plan
- Proposed Menu, including pricing
- Copy of Financial Information for the Proposed Merchant
 - Completed Confidential Financial Statement
 - Tax Returns for the two most recent years for all merchants and guarantors
 - Two months of most current bank statements
 - o Financial Plan, projecting income and expense projections for first three years of business
 - Signed Consent to Investigative Consumer Report form for each owner and guarantor
- Previous 2 years of profit/loss statements for all other locations that have any of the same guarantors on the lease.
- Copy of the Following for Each Guarantor of the Lease:
 - Driver's License, Passport or State Issued ID (for the guarantor/s)
 - Social Security Card (for the guarantor/s)

Supply as much supporting documentation as possible, such as: tax returns (state & federal), bank statements, payroll deposits, deeds, appraisals, investment statements, verification of receivables & notes, real estate holdings, year, make and model of vehicles (owned or leased), proof of additional assets, as well as a full accounting of any and all short-term or long-term liabilities and a written description of any adverse information that will appear on credit or criminal background checks.

All applications will be processed in a timely fashion, during regular business hours Monday through Friday. Applications will be reviewed and approved only after all information has been received, verified and credit and criminal background checks have been reviewed.



CONFIDENTIAL APPLICATION FOR LEASE – COMMERCIAL Section 1

Application is hereby made for lease of the following described premises:									
Location:			Square Footage:						
Use:									
Legal Merchant Name:									
Federal Tax ID Number:									
Sole Proprietor	F	Partnership Corporation		Limited Liability Company					
Incorporation, State of:									
BUSINESS & CREDIT INFORMATION									
Company Name:									
Business Operating Name (dba):									
Phone:		Fax:		E-mail:					
Registered Company Address:									
City:		State:			Zip:				
Name & Tile(s) of Person(s) Signing Lease:									
Other Merchant Contacts (attorney, accountant, lease administrator etc.)									
Name:			Title:						
Phone:			Direct:						
Fax:			E-mail:						
Name:			Title:						
Phone:			Direct:						
Fax:			E-mail:						
GUARANTOR INFORMATION									
Full Legal Name:									
Date of Birth:	Date of Birth: SSN:			Phone:					
Address:									
City	State:				ZIP:				
E-mail:				Cell:					
Full Legal Name:									
Date of Birth: SSN:				Phone:					
Address:									
City: State:				ZIP:					
E-mail:					Cell:				



CONFIDENTIAL APPLICATION FOR LEASE – **COMMERCIAL** Section 2

Have you ever been involved in Bankruptcy Proceedings (voluntary or involuntary):									
Yes 🗌		No							
BANK/LANDLORD REFERENCES									
First Bank:									
Contact:	Phone:		E-mail:						
Type of Account:									
Second Bank:									
Contact:	Phone:		E-mail:						
Present Landlord:									
Contact:	Phone:			E-mail:					
Previous Landlord:									
Contact:	Phone:			E-mail:					
TRADE/SUPPLIER REFERENCES									
Company:									
Address:									
City:	State:		ZIP:						
Contact Person:	Remarks:								
Company:									
Address:									
City:	State:		ZIP:						
Contact Person:	Remarks:								
AGREEMENT									
The foregoing information has been provided by the undersigned to assist Indianapolis City Market and/or its affiliated companies, in determining the credit worthiness of the undersigned and is hereby certified accurate in all respects. Authorization is hereby granted to Indianapolis City Market to make inquiry with any person, firm, association, partnership, or corporation listed above as to the accuracy and present state of any information provided by the undersigned herein or to make inquiry with any credit reporting agency. The information hereinabove provided, and any additional information obtained by Indianapolis City Market and its affiliated companies from such further inquiry shall remain confidential and shall not be further disseminated without the prior written consent of the undersigned.									
SIGNATURES									
Printed Name:	Title:								
Signature:			Date:						