

COMMERCIAL SPACE INFORMATION

Date: _____

Name of Development: _____

Store Address: _____

REQUIRED DOCUMENTATION

Dear Applicant:

Below please find a list of documents that you need to submit **in addition to** the Commercial Space Application Form and the Business Entity Questionnaire (BEQ). It is very important that all items in the Commercial Space Application Form and Business Entity Questionnaire be completed **thoroughly** before submitting for review.

- COPIES OF YOUR LAST THREE (3) FEDERAL INCOME TAX RETURNS**
(Business owners should include copies of both business and personal Federal Income Tax Returns.)
- DOCUMENTATION FOR ALL CASH/ASSETS**
(Copies of your checking and/or savings account(s) statement(s).)
- COPIES OF ANY LICENSES NEEDED TO OPERATE THE PROPOSED BUSINESS**
(For example, professional license for a beauty salon, etc.)
- A BUSINESS CERTIFICATE OR CERTIFICATE OF INCORPORATION**
- A COMPLETED 12 MONTH CASH FLOW ANALYSIS** (See pages 4 & 5)
- ONE FORM OF GOVERNMENT ISSUED PHOTO IDENTIFICATION**
(Driver license, passport, alien registration card, etc.)
- THREE BUSINESS REFERENCES ON COMPANY LETTERHEAD**
- ONE PERSONAL REFERENCE**

INSURANCE INFORMATION

If selected as the tenant you must provide the following when you sign the lease:

- Commercial General Liability Insurance for a combined single limit for bodily injury and property damages of not less than \$1,000,000.00 per occurrence and \$2,000,000.00 in the aggregate

NOTE: All insurance policies must be:

- Written with a company authorized and licensed to do business in Pennsylvania state, with an "A.M. Best" rating of at least "B+"
- Paid for one year from the projected lease start date
- Written with PHA as an "additional named insured" in the policies
- Written on an occurrence basis, giving PHA thirty days written notice prior to reduction or cancellation

BACKGROUND INVESTIGATION

During the application process you will be subject to a background investigation by the Office of Audit and Compliance, which include a tax search.

Please send the completed Commercial Space Application Form, Business Entity Questionnaire and all required documentation to: Shaunte Haley, Contracts Manager, Contracts Administration, 3100 Penrose Ferry Road I Philadelphia, PA 19145. shaunte.haley@pha.phila.gov.

LEASE TYPE: ___ NEW LEASE ___ LEASE RENEWAL ___ TRANSFER/ASSIGNMENT OF LEASE

PERSONAL INFORMATION

- 1. Name of Applicant/Principal(s): _____
- 2. Home Address: _____
City: _____ State: _____ Zip Code: _____
- 3. Mailing Address (if different from above): _____
City: _____ State: _____ Zip Code: _____
- 4. DOB: _____ 5. SSN#: _____ 6. TAX ID#: _____
- 7. Home Phone: _____ 8. Business Phone: _____
- 9. E-mail Address: _____

BUSINESS INFORMATION

- 10. Company Name (Enter full legal name): _____
- 11. Do you now or have you ever leased space with the Housing Authority?
___ No ___ Yes (If yes, specify date and development name)

- 12. Type of Company:
 Business Corporation
 Partnership
 Sole Proprietorship
 Other (Specify) _____
- 13. Names and titles of **ALL** partners/stockholders.
Full Name: _____ Title: _____ % Ownership: _____
Full Name: _____ Title: _____ % Ownership: _____
Full Name: _____ Title: _____ % Ownership: _____
- 14. Proposed business: Describe principal products/commodities sold or services offered.

- 15. What is your experience in the field? _____

- 16. Is your company licensed/authorized to do business in Pennsylvania/Philadelphia? ___ No ___ Yes

17. Is your company licensed/authorized to do business in other states? No Yes (Specify) _____

18. If licensing permits or certificates are required to operate the business, please identify:

<u>Type of License/Permit</u>	<u>Issued by</u>	<u>Issued Date</u>	<u>Expiration Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

19. Have you ever had a business license revoked? No Yes (If yes, explain briefly)

FINANCIAL INFORMATION

20. Gross Receipts/Sales (Complete accordingly for **last three (3)** years):

Current Year 20 ____ \$ _____
Last Year 20 ____ \$ _____
Previous Year 20 ____ \$ _____

21. Identify bank(s) where applicant's/firm's accounts are maintained.

<u>Name of Bank</u>	<u>Bank Address</u>	<u>Account No.</u>	<u>Type of Account</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

22. Do you have a line of credit? No Yes (If yes, identify below)

<u>Source</u>	<u>Limit</u>	<u>Name of Creditor</u>
_____	\$ _____	_____
_____	\$ _____	_____

23. List current creditor(s) or lender(s) or loan(s) to the applicant/firm.

<u>Name of Creditor/Lender</u>	<u>Type of Credit/Loan</u>	<u>Dollar Value</u>
_____	_____	\$ _____
_____	_____	\$ _____

APPLICANT'S DECLARATION/SIGNATURE

I DECLARE THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND CORRECT AND THAT I HAVE NOT KNOWINGLY OR WILLFULLY MADE A FALSE STATEMENT, GIVEN FALSE INFORMATION OR OMITTED INFORMATION IN CONNECTION WITH THIS APPLICATION.

Applicant's Signature (Print & Sign) Date