

<p align="center">APPLICATION FOR LEASE CONTRACT Gabriel Properties, Inc. Office Address: 8405 N Edison Ave, Tampa FL 33604 Office: 813-932-7944 Fax: 813-932-6551 Email: Manager@gabrieltampa.com</p>		
For Plaza?	Date:	
Applicant Full Name:		
DL #:	SSN:	
DOB:	Cell #:	Home #:
Email Address:		
Home Address:		
City:	State:	Zip Code:
Co-Applicant Full Name:		
DL #:	SSN:	
DOB:	Cell #:	Home #:
Email Address:		
Home Address:		
City:	State:	Zip Code:
Company Name:		
Type of Business:	Years in Business:	
Current Business Address:		
How long have you been there:	Rent Amount:	
Bank Name & Address:		
Lease Term Desired:	Date you wish to occupy:	
Fed Tax # if Applicable:		
Why are you leaving your present space?		
Please write a few words about your business model, experience, and features:		
<small>certification of correct information--APPLICANT CERTIFIES THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT. IF A LEASE IS ENTERED INTO AND THE LANDLORD SUBSEQUENTLY LEARNS THAT INCORRECT INFORMATION WAS GIVEN OR PERTINENT INFORMATION WAS OMITTED, THE LEASE MAY BE TERMINATED AT THE LANDLORD'S OPTION. ACKNOWLEDGEMENT AND AGREEMENT-- THE UNDERSIGNED SPECIFICALLY ACKNOWLEDGES AND AGREES THAT ALL INFORMATION PROVIDED IS RELIED ON BY GABRIEL PEOPERTIES, INC. THE PROPERTY WILL NOT BE USED FOR ANY ILLEAL OR PROHIBITED USE. ALL STATEMENTS MADE ARE FOR THE PURPOSE O LEASING COMMERICAL PROPERTY. VERIFICATION OF ANY INFO CONTAINED IN THE APPLICATION MAY BE MADE AT ANY TIME BY GABIEL PEOPERTIES, INC., THROUGH A CREDIT REPORTING AGENCY. I/WE UNDERSTAND THAT ANY MISREPRESENTATION OF ANY KIND WILL VOID THIS TRANSACTION</small>		
Applicant Signature:	Date:	
Co-Applicant Signature:	Date:	