

EdgeWater Building

COMMERCIAL CREDIT APPLICATION

Thank You for considering the EdgeWater Building for your business growth.

● TODAY'S DATE:		DATE OF ANTICIPATED MOVE IN:	
COMPANY NAME:		TYPE OF BUSINESS:	
● CURRENT ADDRESS:		CITY:	ZIP:
			HOW LONG AT THIS ADDRESS?
● PREVIOUS ADDRESS:		CITY:	ZIP:
			HOW LONG AT THIS ADDRESS?
● PRESENT LANDLORD OR MORTGAGE COMPANY:		TELEPHONE:	FAX:
ADDRESS:	CITY:	ZIP:	

● NAMES OF PRINCIPAL PARTNERS:

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● PLEASE PROVIDE THREE OR MORE CREDIT REFERENCES:

NAME:	CONTACT:	PHONE OR FAX:
NAME:	CONTACT:	PHONE OR FAX:
NAME:	CONTACT:	PHONE OR FAX:

● PLEASE PROVIDE TWO OR MORE BANK REFERENCES:

NAME:	CONTACT:	PHONE OR FAX:
NAME:	CONTACT:	PHONE OR FAX:
NAME:	CONTACT:	PHONE OR FAX:

CREDIT AGREEMENT:

The signature below authorize the releases of credit and banking information necessary for approval of this request:

NAME:	TITLE:	DATE:

Print, sign and mail completed application with a non-refundable **\$50** application and credit check fee to:
EdgeWater Building • P O Box 396 • Mukilteo, WA 98275 • Debora Dearie (425) 710-0260