

Keystone Lease Worksheet

Contact information

Name: _____ Business Name: _____

Address: _____ City, State, Zip: _____

Phone #: _____ E-mail: _____

Office #: _____

Term of Lease: _____

Rent

Year 1: _____ month/quarterly/annually

Year 2: _____ month/quarterly/annually

Year 3: _____ month/quarterly/annually

Average Utilities: _____

For new businesses/startups submit the following:

1. Completed business plan
2. Personal bank statement
3. Permission to run a credit check.
4. Permission to run a background check.

For existing businesses

1. Two years of tax returns
2. Two years of Profit and Loss statements
3. Permission to run a credit check.
4. Permission to run a background check.