

ATB Furnished Housing
 Business Application
 6403 N. 50th Street, Tampa, FL 33610
 Office 813-621-8090 Fax 813-626-5485

Type of Business (check one) Corporation Proprietorship Partnership

In which city/area will you need furniture? _____
 Name of ATB sales person (if you are working with one): _____
 How long have you been in business? _____

INSTRUCTIONS (Please print or type all information)
 Corporation: Complete Section 1 (If incorporated for two (2) years or less, a personal guarantee by a Corporate Officer is required. Guarantor must complete Section 2).
 Proprietorship: Complete Section 1 and Section 2
 Partnership: Complete Section 1 and Section 2

SECTION I

Name of Business	DBA (if different)	Phone Number	Fax Number:
Email			
Prior Company Name (if changed within 1 year)			
Local Address: Street	City	State:	Zip:
Principal Address: Street	City	State:	Zip:
Nature of Business	If Incorporated Where		
Corporate Officers: President	V.P		
If Partnership, Principal Partner (1)	Partner (2)		
Bank Name	Branch Location		
Phone #	Account #		
Landlord	Phone #	Contact	

The information on this application is submitted for the purpose of securing a Rental Agreement for ATB Industries. I hereby certify that falsification of this data is grounds for ATB refusing to enter into Rental Agreement. I acknowledge and agree that my Rental Agreement with ATB will not become effective until this rental application had been approved by ATB. I am an authorized representative of the above named company, to act in behalf of said company or organization. I hereby authorize any and all credit reporting agencies to disclose all information concerning past credit history prior to the date of the contract.

Signature: _____ Print Name: _____
 Title: _____ Date: _____

SECTION 2 (To be completed by Sole Proprietor, Partner, or Guarantor, as applicable - see instructions above)

Full Legal Name:	Date of Birth
Home Address: Street:	City: State:
Previous Address: Street:	City: State:
Email:	
Social Security #:	Home Phone #:

I _____ (name of signer), for and in consideration of ATB's approval of this rental application for _____ (name of company) hereinafter referred to as the "company", of which I am _____ (title), hereby personally guarantee to ATB the payment of rent and all other fees which may become due in accordance with the terms and conditions of ATB Industries, whenever the company shall fail to pay same. I understand that this guaranty shall continue and be irrevocable until all the furniture included in the Rental Agreement has been returned to ATB and all fees paid, or until I receive written release from this guaranty from ATB Industries.

Signature: _____ Print Name: _____

CREDIT CARD AUTOMATIC PLAN

Name As it Appears On Card	<input type="checkbox"/> American Express	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover
Account #	Expiration Date		Authorization #	

PERMISSION TO CHARGE MY CREDIT CARD

I (we) hereby authorize ATB Industries to charge to my (our) credit card indicated below for current and future charges pertaining to my (our) furniture rental agreement(s). This authorization is to remain in full force and effective until ATB has received written notification from me (or either of us) in such time and manner as to reasonable act on it.

Signature	Date	Signature
	Date	