TY Commercial Group Privacy Policy on Personal Information

We are dedicated to protecting the privacy of your information. This includes your Social Security or other government identification numbers. Our privacy policy is to help assure you that your information is kept secure. We follow all federal and state laws regarding the protection of your personal information.

How information is collected. You will be furnishing some of your personal information (such as your Social Security or other government identification numbers) at the time you apply to lease from us. This information will be on the lease application form or other documents that you provide to us either on paper or electronically.

How and when information is used. We may use this information in the process of verifying statements made on your lease application, such as your rental, credit and employment history. We may use the information when reviewing any lease renewal. We may also use it to assist us in obtaining payment from you for any money you may owe in the future.

How the information is protected and who has access. Only authorized persons have access to your Social Security or other governmental identification numbers. We keep all documents containing this information in a secure area, accessible only by authorized persons. We limit access to electronic versions of the information to authorized persons only.

How the information is disposed of. After we no longer need your Social Security or other governmental identification numbers, we will store or destroy the information in a manner that ensures that no unauthorized person will have access to it. Our disposal method may include physical destruction or obliteration of paper documents or electronic files containing such information.

Thank you,

TY Commercial Group Managing Agent

TY COMMERCIAL GROUP, INC. APPLICATION FOR LEASE (BUSINESS)

(This section to be completed by TY Commercial Group) Subscriber #_DA05	
Type of Lease:	
REQUIRED: 1) State Certificate of Incorporation/Partnership/LLC 2) Document showing that individual is authorized to execute the Lease on behalf of the Company/Partnership (e.g. CORPORATE RESOLUTION OR PARTNERSHIP DOCUMENTS) 3) Year End Balance Sheet and Income Statement for previous three (3) years	
Business Entity:	State Registered:
Federal Tax ID #:	<u>-</u>
Parent Company Name and Address, if any:	
	Zip Code:
Business Entity Name:	
Business Entity Address:	
	Zip Code: Phone:
Name and Title of Person Executing Lease:	
Phone:	Mobile:
Email:	
Local Contact Name:	
Contact Person Phone:	Email:
Current Landlord or Management Co. (if applicable):	
Address:	
Phone: Have you filed an Assumed N	Name Statement? No Yes (If yes, attach a copy)
APPLICANT(S) MUST SUBNAPPLICATION I, the undersigned duly authorized representative of this review the credit profile of the above named business er persons or firms from any liability in response to questions By typing or signing your name in the signature box below application.	v, you certify that you are the person whose name are listed in this
SIGNATURE:	DATE:
PRINTED NAME:	TITLE: