

E JT SHEFFIELD LLC
1301 Spring Street, Unit 29H
Seattle, Washington 98104

PART I: LETTER OF INTENT & LEASE APPLICATION

Version 1.0 — May 28, 2026

Property/Center Name: _____ Application Date: _____

This Letter of Intent and Application (this “LOI”) outlines the basic proposed terms for a commercial lease and serves as an official application for tenancy. **This LOI is not a binding lease agreement.** A binding legal relationship will only be created upon the execution of the formal, written Commercial Lease Agreement (Parts II through V) by both parties. The complete standard form of the Commercial Lease Agreement (Parts IV and V) is available at jtsheffield.com/lease.

APPLICANT INITIALS: _____ (By initialing here, I confirm I have read and understand that this Letter of Intent is not a binding lease agreement and that no landlord-tenant relationship is created by submitting this document.)

1. APPLICANT INFORMATION

- Legal Business Name (The Entity): _____
- DBA (Doing Business As): _____
- Entity Type (LLC, Corp, etc.): _____ State of Formation: _____
- IRS Business EIN: _____
- State of Washington UBI: _____
- Primary Contact & Lease Guarantor Name: _____
- Contact Phone: _____ Contact Email: _____
- Current Address: _____

2. PROPOSED LEASE TERMS

- Property/Suite Address: _____
- Proposed Permitted Use: _____
- Target Lease Start Date: _____
- Proposed Initial Lease Term: _____
- Proposed Lease Type: CAM Pass-Through (standard) Triple Net (NNN)
- Proposed Initial Base Rent: \$_____ per month.
- Estimated CAM Charges (Common Area Maintenance): \$_____ per month (subject to annual reconciliation).
- Proposed Security Deposit: \$_____ (to be paid upon signing the final Lease).

3. REFERENCES & BACKGROUND

Please provide the following references to assist Landlord in evaluating this application.

Prior Commercial Landlord Reference #1

- **Landlord Name & Contact:** _____
- **Property Address:** _____
- **Lease Dates (From / To):** _____ / _____
- **Reason for Departure (if applicable):** _____

Prior Commercial Landlord Reference #2

- **Landlord Name & Contact:** _____
- **Property Address:** _____
- **Lease Dates (From / To):** _____ / _____
- **Reason for Departure (if applicable):** _____

Primary Banking Reference

- **Bank Name:** _____
- **Branch / Contact Person:** _____
- **Account Relationship Duration:** _____

Note: If you are a first-time commercial tenant without prior commercial landlord references, please provide two (2) business or professional references in their place, and indicate so here:

4. THE GOOD FAITH DEPOSIT

To show sincere interest in the Premises while Landlord processes this application and the parties review the formal Lease, Applicant submits herewith a refundable Good Faith Deposit in the amount of **\$100.00**.

We want this process to be transparent and risk-free. The rules for this deposit are simple:

- **If We Sign a Lease:** The Deposit will be fully credited toward your First Month's Rent or Security Deposit when the formal Lease Agreement is signed.
- **If We Don't Sign a Lease:** If, for any reason, a formal Lease Agreement is not executed (whether Landlord declines the application, we cannot agree on final lease terms, or you simply decide the space isn't the right fit), the Deposit will be **100% refunded** to you within three (3) business days.

5. AUTHORIZATION FOR CREDIT & BACKGROUND CHECK

By signing below, the Applicant (and the individual Primary Contact/Guarantor) represents that all information provided is true and accurate. Applicant authorizes Landlord and its agents to obtain commercial and personal credit reports, verify bank references, contact the references identified in Section 3, and conduct criminal and background checks necessary to evaluate this application.

6. SUBMISSION

Completed applications, together with the Good Faith Deposit, should be submitted by email to **leasing@jtsheffield.com**. Instructions for transmitting the Good Faith Deposit will be provided upon receipt of the completed application.

AGREED AND AUTHORIZED BY APPLICANT

Signature: _____

Printed Name: _____

Title: _____

Date: _____

— END OF PART I —