

LEASE APPLICATION

This lease application is neither an offer to lease nor a binding agreement to lease space within Lessor's property. The preparation and submittal of this form does not constitute a reservation on Lessor's property or an obligation on the part of the Lessee to lease space within Lessor's property. Lessor and Lessee acknowledge that only a fully executed lease agreement is binding upon the parties. This application is provided in order that Lessor might determine the nature of Lessee's business activity and credit worthiness. Lessor agrees to keep this and other documents of similar nature in strict confidence, for the use of Lessor. The information may be disclosed, however, to any other party (i.e., prospective purchaser, mortgagee, etc.) on a "need to know" basis. Lessee authorizes Lessor to obtain a credit report and exchange credit information for Lessor's consideration of Lessee's credit worthiness regarding this application.

=====

Property Name: \_\_\_\_\_

Premises: \_\_\_\_\_ Square Feet: \_\_\_\_\_ Store Number: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ SSN \_\_\_\_\_ DOB \_\_\_\_\_

Owner's Name: \_\_\_\_\_ SSN \_\_\_\_\_ DOB \_\_\_\_\_

Business Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: (H) (\_\_\_\_) \_\_\_\_\_ Phone: (W) (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Tax I.D. Number: \_\_\_\_\_ Type Business: \_\_\_\_\_

Principal(s) and Title(s): \_\_\_\_\_

Describe your Business in detail (if restaurant, attach menu or proposed menu) : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years in Business \_\_\_\_\_ Number of Stores \_\_\_\_\_ Number of Employees \_\_\_\_\_

Annual Sales - Company \$ \_\_\_\_\_ Annual Sales - Per Store \$ \_\_\_\_\_

Landlord Reference – provide contact name & number: \_\_\_\_\_

Are you currently or have you in the last five (5) years been a party to any lawsuit or claim of lawsuit involving you or your business?

\_\_\_\_\_.

If yes, please explain circumstances and provide case reference number:

\_\_\_\_\_  
\_\_\_\_\_

Are you currently or have you in the last ten (10) years been a party to any bankruptcy or creditors rights lawsuit, preceding or claim involving you or your business? \_\_\_\_\_.

If yes, please explain circumstances and provide case reference number: \_\_\_\_\_

Insurance Agent \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Principal Bank: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

List three (3) credit references:

1. \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

2. \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

3. \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Under penalties of perjury, I hereby swear that the above information provided by me is true and correct.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

# PERSONAL FINANCIAL STATEMENT

## IMPORTANT

### Read These Directions Before Completing This Statement And Check Applicable Boxes

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit request, complete entire form except Section 2 and 5.
- If you are applying for joint credit with another person, complete all Sections providing information in Section 2 about the joint applicant.
- If joint applicant(s) income and financial condition are not reported on this form in Sections 3 and 5, etc., they should complete a separate Personal Financial Statement.
- If you are applying for individual credit, but are relying on income from alimony, child support, separate maintenance, or the income of another person as a basis for repayment of the credit request, complete ALL Sections, providing information in Section 2 and 5 about the person whose alimony, support, or maintenance payments or income or assets you are relying on.
- If this statement related to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s) complete entire form except Sections 2 and 5.

| SECTION 1 • APPLICANT INFORMATION (Type or Print)   |                            | SECTION 2 • JOINT APPLICANT OR OTHER PARTY INFORMATION   |                            |
|---|----------------------------|--|----------------------------|
| Name  |                            | Name   |                            |
| Residence Address   |                            | Residence Address  |                            |
| City, State & Zip   |                            | City, State & Zip  |                            |
| Position or Occupation  |                            | Position or Occupation   |                            |
| Business Name   |                            | Business Name  |                            |
| Business Address  |                            | Business Address   |                            |
| City, State & Zip   |                            | City, State & Zip  |                            |
| Res. Phone  | Bus. Phone                 | Res. Phone   | Bus. Phone                 |
| Nearest Relative<br>Not living with Me  | Relationship               |  |                            |
| Address   | Phone                      |  |                            |
| <b>SECTION 3 • STATEMENT OF FINANCIAL CONDITION AS OF _____, 19____</b>                     |                            |  |                            |
| Assets<br>(Do not include Assets of doubtful value)   |                            | Liabilities  |                            |
|   | In Dollars<br>(Omit Cents) |  | In Dollars<br>(Omit Cents) |
| Cash on hand and in banks - List on Sched. F.   | \$                         | Notes payable to Financial Institutions -<br>List on Schedule F  | \$                         |
| Securities - List on Schedule A   | \$                         | Accounts and bills due - Schedule B  | \$                         |
| Securities held by broker in margin accounts  | \$                         | Unpaid income tax  | \$                         |
| Restricted or control stocks  | \$                         | Other unpaid taxes and interest  | \$                         |
| Accounts, Loans and Notes Receivable -<br>List on Schedule C                                | \$                         | Real estate mortgages payable - List on Sched. D   | \$                         |
| Real Estate Owned - List on Schedule D  | \$                         | Other debts - itemize by Lender Name   | \$                         |
| Automobiles and other personal property<br>List on Schedule G                               | \$                         |  | \$                         |
| Cash value life insurance - List on Schedule E  | \$                         |  | \$                         |
| Other assets - itemize  | \$                         |  | \$                         |
|   | \$                         |  | \$                         |
|   | \$                         | <b>TOTAL LIABILITIES</b>   | <b>\$</b>                  |
|   | \$                         | <b>NET WORTH</b>   | <b>\$</b>                  |
| <b>TOTAL ASSETS</b>   | <b>\$</b>                  | <b>TOTAL LIABILITY AND NET WORTH</b>   | <b>\$</b>                  |
| <b>SECTION 4 • APPLICANT INCOME AND RELATED INFORMATION</b><br>for year ended _____, 19____ |                            | <b>SECTION 5 •</b> If Section 2 is completed, provide income and related information on<br>Joint Applicant or other party for year ended _____, 19____ |                            |
| Salary  | \$                         | Salary, Bonuses & commissions  | \$                         |
| Dividends / Interest  | \$                         | Dividends / Interest   | \$                         |
| Real estate income  | \$                         | Real estate income   | \$                         |

|   |    |   |    |
|---|----|---|----|
| Other income (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation) | \$ | Other income (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation) | \$ |
| TOTAL   | \$ | TOTAL   | \$ |

**CONTINGENT LIABILITIES**

|                                     |    |                                      |    |
|-------------------------------------|----|--------------------------------------|----|
| As Endorser, co-maker or guarantor? | \$ | Other special debt                   | \$ |
| On leases or contracts?             | \$ | Amount of contested income tax liens | \$ |
| Legal claims                        | \$ | Other (describe)                     | \$ |

**ESTIMATE OF ANNUAL EXPENSES**

|                    |    |                |    |
|--------------------|----|----------------|----|
| Income Taxes       | \$ | Rent Payable   | \$ |
| Other Taxes        | \$ | Other Expenses | \$ |
| Insurance Premiums | \$ | TOTAL          | \$ |
| Mortgage Payments  | \$ |                |    |

**PERSONAL INFORMATION**

|   |                                   |
|---|-----------------------------------|
| Do you have a will? If so, name of executor   | No. of dependents                 |
| Are you a partner or officer in any other venture? If so, describe                                | Income tax settled through (date) |
| Are you obligated to pay alimony, child support or separate maintenance payments? If so, describe |                                   |
| Have you ever been declared bankrupt? In the last 10 years? If so, explain                        |                                   |

**SCHEDULE A - SECURITIES**

| Number of Shares or Face Value (Bonds) | Description | In Name Of | Are These Pledged | Market Value |
|--|-------------|------------|-------------------|--------------|
|  |             |            |                   |              |
|  |             |            |                   |              |
|  |             |            |                   |              |
|  |             |            |                   |              |
| Total                                  |             |            |                   | \$           |

**SCHEDULE B - ACCOUNTS & BILLS DUE**

| Account # | Creditor | In Name of | Mo. Pmt. | Balance |
|-----------|----------|------------|----------|---------|
|           |          |            |          |         |
|           |          |            |          |         |
|           |          |            |          |         |
| Totals    |          |            | \$       | \$      |

**SCHEDULE C - ACCOUNTS, LOANS AND NOTES RECEIVABLE (Indicate by a ✓ If Others Have Ownership Interest)**

| Name of Debtor | ✓ | Amount Owning | Age of Debt | Purpose of Borrowing | Description of Security Held | Date payment Expected |
|----------------|---|---------------|-------------|----------------------|------------------------------|-----------------------|
|                |   |               |             |                      |                              |                       |
|                |   |               |             |                      |                              |                       |
|                |   |               |             |                      |                              |                       |
| Total          |   | \$            |             |                      |                              |                       |

**SCHEDULE D - REAL ESTATE OWNED (Indicate by a ✓ If Others Have Ownership Interest)**

| Address & Type Of Property | ✓ | Mortgagor | % Of Ownership | Date Acquired | Cost | Market Value | Mortgage Balance | Mo. Pmt. |
|----------------------------|---|-----------|----------------|---------------|------|--------------|------------------|----------|
|                            |   |           |                |               |      |              |                  |          |
|                            |   |           |                |               |      |              |                  |          |
|                            |   |           |                |               |      |              |                  |          |
| Totals                     |   |           |                |               |      | \$           | \$               | \$       |

**SCHEDULE E - LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE**

| Name of Insurance Company | Owner of Policy | Beneficiary | Face Amount | Policy Loans | Cash Surrender Value |
|---------------------------|-----------------|-------------|-------------|--------------|----------------------|
|                           |                 |             |             |              |                      |

|  |  |  |  |        |    |    |
|--|--|--|--|--------|----|----|
|  |  |  |  |        |    |    |
|  |  |  |  |        |    |    |
|  |  |  |  |        |    |    |
|  |  |  |  |        |    |    |
|  |  |  |  | Totals | \$ | \$ |

**SCHEDULE F - CASH IN BANKS AND LOANS DUE TO FINANCIAL INSTITUTIONS**

| Name of Institution | Account # | Type of Ownership | On Deposit | Amount Owing on Loan/Credit Accts. | Max. Credit Line | Mo. Pmt. | Collateral (If Any) & Type of Ownership |
|---------------------|-----------|-------------------|------------|------------------------------------|------------------|----------|---|
|                     |           |                   | \$         | \$                                 |                  |          |   |
|                     |           |                   |            |                                    |                  |          |   |
|                     |           |                   |            |                                    |                  |          |   |
|                     |           |                   |            |                                    |                  |          |   |
|                     |           |                   |            |                                    |                  |          |   |
|                     |           | Cash on Hand      | \$         |                                    |                  |          |   |
|                     |           |                   | Total Due  | \$                                 |                  |          |   |

**SCHEDULE G - AUTOMOBILES AND OTHER PERSONAL PROPERTY (Indicate by a ✓ if Others Have Ownership Interest)**

| DESCRIPTION | ✓ | Date When New | Cost When New | Value Today | LOANS ON PROPERTY |                 |
|-------------|---|---------------|---------------|-------------|-------------------|-----------------|
|             |   |               |               |             | Balance Due       | To Whom Payable |
| Automobiles |   |               | \$            | \$          | \$                |                 |
|             |   |               |               |             |                   |                 |
|             |   |               |               |             |                   |                 |
|             |   |               |               |             |                   |                 |
|             |   |               | Total         | \$          |                   |                 |

Other or continued pertinent information you wish to provide:

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each of the undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of change is given to you by the undersigned. The undersigned also agrees to notify you immediately in writing of any significant adverse change in such financial condition. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my / our creditworthiness. You are authorized to answer questions about your credit experience with me/us. I understand that you will retain this application whether or not it is approved.

Signature (Individual) \_\_\_\_\_ Signature (Other Party) \_\_\_\_\_

S.S. No. \_\_\_\_\_ Date of Birth \_\_\_\_\_ S.S. No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Date Signed \_\_\_\_\_ Date Signed \_\_\_\_\_