

GENERAL INFORMATION

DATE

PROPERTY / SHOPPING CENTER

PROPOSED SQUARE FEET

LEGAL NAME OF TENANT

TYPE OF BUSINESS

OF YEARS IN BUSINESS

FEDERAL TAX I.D. NUMBER

NAME OF LOCAL CONTACT / TITLE

BUSINESS ENTITY

☐

Individual

☐

Partnership

☐

Corporation

If a corporation, please complete the following:

NAME AND ADDRESS OF REGISTERED AGENT

STATE OF INCORPORATION

PERSONAL GUARANTOR(S)

Guarantor 1

NAME

DATE OF BIRTH

ADDRESS

PHONE #

SS #

DRIVER'S LICENSE #

Guarantor 2

NAME

DATE OF BIRTH

ADDRESS

PHONE #

SS #

DRIVER'S LICENSE #

AUTHORIZED SIGNERS FOR CORPORATION

Names and titles of persons authorized to sign for the corporation:

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PARTNERS / PRINCIPALS

PERSON EXECUTING THE LEASE

Name	Social Security #	Business Address	Telephone #	Fax #

PARENT COMPANY / SUBSIDIARY

NAME OF PARENT COMPANY, IF ANY

PARENT COMPANY ADDRESS

NAME OF SUBSIDIARY, IF ANY

SUBSIDIARY ADDRESS

CURRENT BUSINESS ADDRESS

TELEPHONE

LEASE DATES

CURRENT LANDLORD

CURRENT LANDLORD

PHONE

LANDLORD'S ADDRESS

BANKING REFERENCES

NAME OF BANK

BANKING OFFICER

ADDRESS

PHONE

ACCOUNT

CHECKING

SAVINGS

LOAN

AUTH. TO RELEASE INFO (INITIALS)

NAME OF BANK

BANKING OFFICER

ADDRESS

PHONE

ACCOUNT

CHECKING

SAVINGS

LOAN

AUTH. TO RELEASE INFO (INITIALS)

BUSINESS / VENDOR REFERENCES

Name	Address	Phone #

PERSONAL REFERENCES

Name	Address	Phone #

ATTACHMENTS

Financial Statement (Audited) YES ☐ NO ☐

Annual Report YES ☐ NO ☐

Tax Returns YES ☐ NO ☐

AUTHORIZATION & APPROVAL

I, the undersigned prospective tenant, authorize Landlord or its Agent to review my own personal credit profile and/or the credit profile of the above named firm for use in conjunction with the application for Lease. I release all persons or firms, including the banks referenced above, from any liability in response to questions asked pertaining to this application.

SIGNATURE**PRINT NAME****TITLE****DATE**

APPLICANT INFORMATION

AS OF

NAME

DATE OF BIRTH

ADDRESS

SOCIAL SECURITY NO.

CITY, STATE & ZIP

RESIDENCE PHONE

POSITION OR OCCUPATION

BUSINESS PHONE

BUSINESS NAME

BUSINESS ADDRESS

THIS IS A(N):

☐

Individual Financial Statement

☐

Joint Financial Statement With Spouse (complete below)

SPOUSE INFORMATION — COMPLETE IF JOINT

SPOUSE NAME

DATE OF BIRTH

SOCIAL SECURITY NO.

POSITION OR OCCUPATION

BUSINESS NAME

BUSINESS PHONE

BUSINESS ADDRESS

CITY, STATE & ZIP

ASSETS, LIABILITIES & NET WORTH

You may apply for credit individually or jointly. List all amounts in dollars, omit cents. Please complete all appropriate schedules; if space is inadequate, attach an additional sheet.

ASSETS	AMOUNT
Deposits in Banks & Other Financial Inst. (Sch. 1)	
Cash Value of Life Insurance (Sch. 2)	
Notes and Accounts Receivable	
Marketable Stocks & Bonds (Sch. 3)	
Stocks in Closely Held Corporations (Sch. 4)	
Assets of Proprietorships	
Assets in Partnerships & Joint Ventures	
Vehicles, Boats, Machinery & Equipment (Sch. 5)	
Wholly Owned Real Estate (Sch. 6)	
Personal Property, Furniture, etc.	
TOTAL ASSETS	

LIABILITIES AND NET WORTH	AMOUNT
Credit Cards	
Loans on Life Insurance (Sch. 2)	
Taxes Due — Income	
Other Accounts Payable	
Liabilities of Proprietorships	
Liabilities of Partnerships / Joint Ventures	
Loans on Vehicles, Boats, Machinery & Equip. (Sch. 5)	
Loans on Wholly Owned Real Estate (Sch. 6)	
Total Liabilities	
Net Worth	
TOTAL LIABILITIES & NET WORTH	

SCHEDULE 1 — DEPOSIT ACCOUNTS

Name of Financial Institution & Location	Demand Deposits	Time Deposits	Name of Financial Institution & Location	Demand Deposits	Time Deposits

SCHEDULE 2 — LIFE INSURANCE

Name of Person Insured	Beneficiary	Face Amount	Cash Value	Policy Loans	Policy Assigned?	If Assigned, To Whom?

SCHEDULE 3 — MARKETABLE STOCKS / BONDS (NYSE, AMEX, NASDAQ)

# Shares / Face Value	Description	Registered In Name Of	If Pledged, To Whom?	Date Acquired	Cost	Market Value
TOTAL						

If stocks or bonds are held in a brokerage account, summarize the account as one entry and attach a statement.

SCHEDULE 4 — STOCK IN CLOSELY HELD CORPORATIONS

# Shares Owned & % Ownership	Corporation Name	Stock Held In Name Of	Stockholder's Equity	Annual Statement Date	Value of Shares
TOTAL					

Please provide a financial statement if total value exceeds 10% of your net worth.

SCHEDULE 5 — VEHICLES, BOATS, MACHINERY & EQUIPMENT

Yr	Make	Model	Yr Acq.	Cost	Market Value	Loan Balance	Loan Payable To	Payment Amt.	Pmt. Freq.	Orig. Term (mths)
TOTAL										

SCHEDULE 6 — WHOLLY OWNED REAL ESTATE

Location / Address & Description	Title In Name Of	Cost / Yr Acquired	Market Value	Mortgage Balance	Mortgage Payable To / How Payable (\$ per)
TOTAL					

SOURCE OF INCOME FOR YEAR ENDED

Salaries — Yours	
Salaries — Your Spouse, if applicable	
Bonuses & Commissions	
Dividends	
Interest	
Net Profits From: Rental Property	
Net Profits From: Proprietorships	
Net Profits From: Partnerships	
Net Profits From: Joint Ventures	
Other Income (alimony/child support need not be revealed)	
TOTAL INCOME	

Attach a copy of your most recent income tax return and K-1s.

CONTINGENT LIABILITIES

Are you indirectly liable for obligations of others? YES ☐ NO ☐

NAME OF BORROWER	TOTAL AMOUNT OWED
LENDER	DESCRIPTION
NAME OF BORROWER	TOTAL AMOUNT OWED
LENDER	DESCRIPTION
TOTAL AMOUNT AS ENDORSER, COMAKER, OR GUARANTOR	

PERSONAL INFORMATION

# OF DEPENDENTS	AGES
Obligated to pay alimony, child support, or separate maintenance?	YES ☐ NO ☐
IF SO, PROVIDE DETAILS	
Are you a defendant in any suits or legal actions?	YES ☐ NO ☐
IF SO, DESCRIBE	
Ever declared bankruptcy or had judgments recorded against you?	YES ☐ NO ☐
IF SO, EXPLAIN (DATES, LOCATION, AMOUNTS)	
Do you have a will?	YES ☐ NO ☐
IF SO, NAME OF EXECUTOR	
Do you have disability insurance?	YES ☐ NO ☐
MONTHLY AMOUNT	YEARS COVERED

SIGNATURES

DATE	YOUR SIGNATURE
DATE (SPOUSE, IF JOINT)	SPOUSE SIGNATURE
THIS STATEMENT RECEIVED BY	DATE