LEASE APPLICATION

BUSINESS INFORMATION

| ENTITY NAME: | D/B/A: | | | |
|--|----------------------|--|--|--|
| TELEPHONE #: (_) | FEDERAL TAX ID #: | | | |
| PHYSICAL ADDRESS: | | | | |
| MAILING ADDRESS: | | | | |
| CURRENT LANDLORD: | TELEPHONE #: () | | | |
| LANDLORD'S ADDRESS: | | | | |
| DATE FIRM ESTABLISHED: / / BUSINESS LICENSE #: | | | | |
| CITY/STATE WHERE FIRM IS LICENSED | /REGISTERED: | | | |
| IS THE FIRM A CORPORATION:PARTNERSHIP:SOLE PROPRIETORSHIP: | | | | |
| PRINCIPAL PARTY: | TITLE: | | | |
| RESIDENT AGENT (NAME AND ADDRES | SS: | | | |
| NATURE OF BUSINESS: | NUMBER OF EMPLOYEES: | | | |
| INSURANCE COMPANY: | | | | |
| AGENT'S NAME: | _TELEPHONE #: () | | | |
| BANK NAME: | _BRANCH: | | | |
| ADDRESS: | | | | |
| TYPE OF ACCOUNT: | ACCOUNT #: | | | |
| | PERSONAL INFORMATION | | | |
| 1) NAME:(LAST, FIRST, MI) | SOCIAL SECURITY #: | | | |
| | HOW LONG: | | | |
| PREVIOUS ADDRESS: | HOW LONG: | | | |
| BANK NAME: | BRANCH: | | | |
| ADDRESS: | TELEPHONE #: () | | | |
| CHECKING ACCT. #: | SAVINGS ACCT. #: | | | |
| 2) NAME: | SOCIAL SECURITY #: | | | |
| (LAST, FIRST, MI) RESIDENCE ADDRESS: | HOW LONG: | | | |
| PREVIOUS ADDRESS: | HOW LONG: | | | |
| BANK NAME: | BRANCH: | | | |
| ADDRESS: | _TELEPHONE #: () | | | |
| CHECKING ACCT. #: | SAVINGS ACCT. #: | | | |

BUSINESS FINANCIAL STATEMENT

| CURRENT ASSETS | AMOUNT |
|-------------------------------|--------------------------|
| CASH ON HAND: | <u>\$</u> |
| ACCOUNTS & NOTES RECEIVABLE: | <u>\$</u> |
| STOCKS & BONDS: | <u>\$</u> |
| INVENTORIES: | <u>\$</u> |
| MARKETABLE SECURITIES: | <u>\$</u> |
| CASH VALUE OF LIFE INSURANCE: | \$ |
| OTHER CURRENT ASSETS: | <u>\$</u> |
| TOTAL CURRENT ASSETS: | \$ |
| FIXED ASSETS | AMOUNT |
| BUILDINGS – MARKET VALUE: | <u>\$</u> |
| MACHINERY & EQUIPMENT: | \$ |
| FURNITURE & FIXTURES: | <u>\$</u> |
| AUTOS/DELIVERY EQUIPMENT: | <u>\$</u> |
| LAND: | <u>\$</u> |
| OTHER FIXED ASSETS: | <u>\$</u> |
| TOTAL FIXED ASSETS: | <u>\$</u> |
| TOTAL ASSETS: | \$ |
| LIABILITIES | AMOUNT |
| ACCOUNTS PAYABLE: | \$ |
| BANK LOANS – SHORT TERM: | <u>\$</u> |
| REAL ESTATE LOANS: | <u>\$</u> |
| NOTES – SHORT TERM: | <u>\$</u> |
| TAXES PAYABLE: | \$ |
| LONG TERM DEBTS: | <u>\$</u> |
| OTHER LIABILITIES: | _\$ |
| TOTAL LIABILITIES: | \$ |
| NET WORTH: | <u>\$</u> |
| | |
| SIGNATURE | CO-APPLICANT'S SIGNATURE |
| DATED: | DATED: |

PERSONAL FINANCIAL STATEMENT

| CURRENT ASSETS | AMOUNT |
|-------------------------------|--------------------------|
| CASH ON HAND: | \$ |
| ACCOUNTS & NOTES RECEIVABLE: | \$ |
| STOCKS & BONDS: | \$ |
| INVENTORIES: | \$ |
| MARKETABLE SECURITIES: | \$ |
| CASH VALUE OF LIFE INSURANCE: | \$ |
| OTHER CURRENT ASSETS: | \$ |
| TOTAL CURRENT ASSETS: | <u>\$</u> |
| FIXED ASSETS | AMOUNT |
| BUILDINGS – MARKET VALUE: | \$ |
| MACHINERY & EQUIPMENT: | \$ |
| FURNITURE & FIXTURES: | \$ |
| AUTOS/DELIVERY EQUIPMENT: | \$ |
| LAND: | \$ |
| OTHER FIXED ASSETS: | \$ |
| TOTAL FIXED ASSETS: | \$ |
| TOTAL ASSETS: | _ \$ |
| LIABILITIES | AMOUNT |
| ACCOUNTS PAYABLE: | \$ |
| BANK LOANS – SHORT TERM: | \$ |
| REAL ESTATE LOANS: | \$ |
| NOTES – SHORT TERM: | \$ |
| TAXES PAYABLE: | \$ |
| LONG TERM DEBTS: | \$ |
| OTHER LIABILITIES: | \$ |
| TOTAL LIABILITIES: | <u>\$</u> |
| NET WORTH: | _ \$ |
| | |
| SIGNATURE | CO-APPLICANT'S SIGNATURE |
| DATED: | DATED: |

REFERENCES

| 1) | | |
|---------------|---|--|
| / | NAME | TELEPHONE NUMBER |
| | ADDRESS | |
| | ADDICEO | |
| 2) | NAME | () TELEPHONE NUMBER |
| | TVIVIL | TEELI HONE NOMBER |
| | ADDRESS | |
| 3) | | () |
| | NAME | TELEPHONE NUMBER |
| | ADDRESS | |
| 4) | | |
| 4) | NAME | TELEPHONE NUMBER |
| | ADDDD00 | |
| | ADDRESS | |
| HAVE | ANY SUITS AND/OR JUDGEMENTS BEEN FILED AGAINST YO | DU? |
| EXPLA | AIN: | |
| | | |
| HAVE | YOU EVER FILED BANKRUPTCY? | EXPLAIN: |
| | | |
| | | |
| | PLEASE READ BEF | CODE SIGNING |
| | I LEASE READ DEI | OKE SIGNING |
| | | SE THIS COMPANY, OR ITS AGENT, FROM ANY AND ALL IE VERIFICATION, OR ATTEMPTED VERIFICATION OF |
| INFOR | | REE TO RELEASE FROM ALL LIABILITY ANY LANDLORD, |
| APPLI | CANT (S) HAS READ AND UNDERSTANDS THE ABOVE S | TATEMENT AND TO THE BEST OF HIS/HER KNOWLEDGE |
| STATI COMP | ES THAT ALL FACTS ARE TRUE AND CORRECT. IT IS | FURTHER UNDERSTOOD THAT A CREDIT REPORT AND DENT AGENT. ANY FALSE INFORMATION OR STATEMENT |
| \ | | 3. 22. 32 |
| OLON: | TUDE | CICNATURE |
| SIGNA | IUKE | SIGNATURE |
| | DDD (TED | VALUE DRIVITED |
| name | PRINTED | NAME PRINTED |
| | | |
| DATEI |) | DATED |