### Separate financial statements are required unless all information will apply to joint parties. There will be a one-time application fee of \$50.00. A CURRENT COPY OF DRIVERS LICENSE MUST ALSO BE PROVIDED

	PERSONAL INFORMATION	
Name	Employer Name	
Social Security Number	Business Address	
Date of Birth	Business Phone No.	No. of Years Employed
Home Address	Partner or Officer in any	
City, State, Zip	Other Business	
Phone No.	Name of your Accountant	
Email	Phone No./Email of your Accou	untant

ASSETS			LIABILITIES		
Checking/Saving Account Information					
Name of Bank	Account #	Amount	Contact Name at Bank	Contact's Phone #	
Cash on hand and in banks			Notes Payable – Secured		
Salary			To banks – Unsecured		
Notes receivable			Notes Payable to others		
Stocks and Bonds – see Schedule A			Accounts Payable		
Real Estate – see Schedule B			Unpaid Taxes		
Cash value of life insurance See Schedule C			Mortgages on Real Estate Payments See Schedule B		
Accounts receivable			Alimony/Child Support		
Automobiles			Other Debts (itemize)		
Other Assets (itemize)					
			TOTAL LIABILITIES		
TOTAL ASSETS			NET WORTH (ASSETS LESS LIABILITIES)		

SOURCE OF ANNUAL INCOME	
Salary	
Bonus and Commissions	
Dividends	
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 (Itemize)	
TOTAL	
GENERAL INFORMATION	
Contingent Liabilities – As endorser or co-maker	
Unsatisfied Judgments or Law Suites pending	
Are any income tax returns made by you for prior years being contested?	
If so, what do you estimate as the additional amount you may be required to pay?	
Are you obligated to pay alimony, child support, or separate maintenance payments?	
Are any assets pledged or in joint names other than as described on Schedules?	
Have you ever been declared bankrupt?	
Do you have a will? Who is named as your executor?	

# SCHEDULE A – STOCKS AND BONDS

No. of Shares Face Value In (Bonds)	Description (include maturity on bonds)	In Name Of	Are These Pledged?	Market Value
• •				

## SCHEDULE B – REAL ESTATE

Address & Type Of Property	Title In Name Of	% Of Ownership	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount

## SCHEDULE C – LIFE INSURANCE

	5 6.125 6 22				
			Face	Policy	Cash Surrender
Name of Insurance Company	Owner of Policy	Beneficiary	Amount	Loans	Value

# SCHEDULE D – DEPOSIT ACCOUNTS AND CREDIT WITH FINANCIAL INSTITUTIONS (BANKS, SAVINGS AND LOAN ASSOCIATIONS, AND CREDIT UNIONS)

Name & Address	Account Or Credit In	Account Cash	Original Loan	Secured Or	Original	Maturity	Current Loan
Of Institution	The Name Of	Balance	Amount	Unsecured	Date	Date	Balance

# (USE ADDITIONAL SCHEDULES IF NECESSARY)

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you for 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. I (we) understand that you are relying on this information (including the designation made as to ownership of property) in deciding to grant or continue credit. I (we) represent and warrant that the information provided is true and complete. You may consider this statement to be true and correct until I (we) notify you in writing of a change. You are authorized to make all inquiries you consider necessary to verify the accuracy of these statements and to determine my (our) creditworthiness, including, but not limited to requesting and obtaining copies the credit reports from any of the major credit reporting bureaus (Experian, Trans Union, etc.) of all applicants, tenants and/or lease guarantors at any time during the term of the lease, or after the term of the lease if there remain any outstanding monetary obligations due and owing from applicants, tenants or lease guarantors to LANDLORD. Upon written request, we will provide all applicants, tenants or lease guarantors with a copy of any credit report that LANDLORD has obtained as authorized by this term. You are authorized to answer questions about your credit experience with me (us).



SIGNATURE (Individual)



ADDRESS	ГҮ 
	(Attach a copy of Certificate of Incorporation & Corporate Resolution)
) PERSONAL GUARANT NAME: ADDRES	
SOCIAL SECURITY # O (Attach most recent Financ	R DUN & BRADSTREET #: ial Statements)
) TYPE OF BUSINESS:	
) DO YOU HAVE OTHER IF YES, HOW MANY WHERE?	
) VALUATION OF BEGIN	NING INVENTORY?
) HOW MUCH WILL YOU	EXPEND ON INTERIOR IMPROVEMENT?
) HOW MUCH WILL YOU	EXPEND FOR STORE FIXTURES?
, ,	EXPEND FOR STORE FIXTURES?
) PROJECTED FIRST YEA ) % SALES INCREASE AN Y Y Y	

