



FINANCIAL STATEMENT
For Commercial Tenancy

GENERAL INFORMATION				
NAME IN FULL	DRIVERS LICENSE	SOCIAL SECURITY NO.	DOB	PHONE NUMBER
EMAIL ADDRESS				
SPOUSE'S NAME	DRIVERS LICENSE	SOCIAL SECURITY NO.	DOB	DEPENDENTS No. Ages:
RESIDENCE ADDRESS (No., Street, City, State, Zip Code)			HOW LONG?	MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
PREVIOUS ADDRESS IF AT ABOVE ADDRESS LESS THAN 5 YEARS (No., Street, City, State, Zip Code)				
1.				
2.				
EMPLOYER NAME	EMPLOYER ADDRESS	PHONE	POSITION	# Years
PREVIOUS EMPLOYER NAME	PREVIOUS EMPLOYER ADDRESS	PHONE	POSITION	# Years
SPOUSE EMPLOYER NAME	EMPLOYER ADDRESS	PHONE	POSITION	# Years
SPOUSE PREVIOUS EMPLOYER NAME	PREVIOUS EMPLOYER ADDRESS	PHONE	POSITION	# Years

ASSETS			LIABILITIES		
CASH	(Schedule A)	(omit cents)	NOTES PAYABLE TO BANK		(omit cents)
	Cash on Hand:				
	Bank:				
	Other:				
IRA's, KEOGHs, PENSION FUNDS	(Schedule B)		OTHER NOTES AND ACCOUNTS PAYABLE	Real Estate Loans (Schedule C)	
				Other Loans (Schedule E)	
STOCKS AND BONDS	(Schedule B)		TAXES	Current Years Unpaid Income Tax	
NOTES	Trust Deeds & Mortgages			Other Real Estate Taxes Unpaid	
	Relatives & Friends				
RECIEVABLE (COLLECTABLE)			OTHER LIABILITIES	(Attach Details)(Schedule E)	
REAL ESTATE	Improved (Schedule C)				
	Unimproved (Schedule C)				
LIFE INSURANCE	Cash Surrender Value				
OTHER PERSONAL PROPERTY	Automobiles				
	Other (Schedule D)				
TOTAL ASSETS			TOTAL LIABILITIES		

Please answer all questions:

- Have you ever been a debtor in a bankruptcy proceeding? No Yes: If so, give details _____
- Do you have any tax liens against you? No Yes: If so, give details _____
- Are any of your assets in a Trust? No Yes: If so, give details _____
- Have you ever been arrested or convicted of a crime? No Yes: If so, give details _____
- Have you been audited by the IRS in the last 7 years? No Yes: If so, give details _____
- Do you have any judgments against you? No Yes: If so, give details _____
- Are you a party to a Lawsuit? No Yes: If so, give details _____
- Are you a US Citizen? No Yes: If not, are you a permanent resident Alien No Yes

PERSONAL INCOME AND EXPENSE STATEMENT			
ANNUAL INCOME		ANNUAL EXPENDITURES	
SALARY, BONUS & COMMISSIONS:		PROPERTY TAXES & ASSESSMENTS:	
DIVIDENDS & INTEREST:		FEDERAL & STATE INCOME TAX:	
RENTAL INCOME (GROSS):		REAL ESTATE LOAN PAYMENTS:	
BUSINESS INCOME (NET):		MORTGAGE / RENT PAYMENTS:	
OTHER INCOME (DESCRIBE):		CONTRACTS & OTHER NOTE PAYMENTS:	
1.		INSURANCE PREMIUMS:	
2.		ESTIMATED LIVING EXPENSES:	
3.		OTHER EXPENDITURES (DESCRIBE)	
4.		1.	
5.		2.	
TOTAL ANNUAL INCOME:		TOTAL ANNUAL EXPENDITURES:	

SCHEDULE A - CASH			
Cash:	BANK NAME	ACCOUNT NUMBER	AMOUNT
Bank Account 1:			
Bank Account 2:			
Bank Account 3:			
Credit:	BANK NAME	ACCOUNT NUMBER	AMOUNT
Bank Account 1:			
Bank Account 2:			
Bank Account 3:			
Credit References:	TYPE/LENDER	LOAN NUMBER	Monthly Payment
Loan 1			
Loan 2			
Loan 3			

SCHEDULE B - IRA, KEOGH, PENSION FUNDS, STOCKS AND BONDS		
TYPE	DESCRIPTION	AMOUNT
1.		
2.		
3.		
4.		



SCHEDULE C - REAL ESTATE			
LOCATION OF PROPERTY	DESCRIPTION OF PROPERTY	OUTSTANDING NOTE AMOUNT	ESTIMATED VALUE
1.			
2.			
3.			
4.			

SCHEDULE D- OTHER ASSETS		
TYPE	DESCRIPTION	AMOUNT
1.		
2.		
3.		
4.		

SCHEDULE E- OTHER LIABILITIES/LOANS		
TYPE	DESCRIPTION	AMOUNT
1.		
2.		
3.		
4.		

You do not have to list alimony, child support or separate maintenance unless you want such to be considered as a basis for repaying this obligation. For the purpose of procuring and establishing credit from time to time and to induce you to extend credit, I am furnishing the above along with any attached schedules, which I warrant is a true and complete statement of my financial condition to the best of my knowledge. I agree to notify you immediately of any material adverse change in financial condition. I understand that any material misstatement or omission shall be a cause of default of any credit you have extended to me, or which is guaranteed by me, and you may, at your option, accelerate the payment of that credit an/or terminate our credit arrangement. I authorize you to make an employment and credit check(s), and to obtain any information you may require concerning the statements made on this application and to reverify the information from time to time. I agree that this application shall remain your property whether or not the credit is granted. You are also authorized to share with others concerned with my credit standing, information about my transactions with you. If this is a joint Application, this statement applied to both of us. my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

The undersigned certifies that the information provided herein is true and correct.

APPLICANTS SIGNATURE

DATE

CO-APPLICANTS SIGNATURE

DATE

Co-Applicant sign above if this is to be a joint account. If not joint application, Spouse sign below to authorize verification of income and credit history.

To the best of my knowledge the above information is complete and correct.

SPOUSE'S SIGNATURE

DATE



Please include the following information with this application

1. Current Corporation Balance Sheet and Income Statement (*if applicable*).
2. Statement from Landlord verifying your current lease status (*if applicable*).
3. Your last two year's personal tax returns.
4. Please enclose a photocopy of your most recent proof of personal identification and submit with this application. (i.e., driver's license, passport photo, State I.D., etc.)
5. Business plan (see below).

Please also include the following
BUSINESS PLAN INFORMATION
in a concise and brief format.

MANAGEMENT	MERCHANDISING	FINANCIAL
<ul style="list-style-type: none">• Method of store operation	<ul style="list-style-type: none">• Merchandise store will carry	<ul style="list-style-type: none">• When will you achieve break-even point?
<ul style="list-style-type: none">• Store manager(s)	<ul style="list-style-type: none">• Mix of products	<ul style="list-style-type: none">• Expected sales levels ending each year of the term
<ul style="list-style-type: none">• Number of the other locations also being managed	<ul style="list-style-type: none">• Pictures, photos, or sample of merchandise to be sold	
<ul style="list-style-type: none">• Hours of store operation	<ul style="list-style-type: none">• Promotion and marketing to be utilized	
<ul style="list-style-type: none">• Numbers of employees		