

Trade References (Where you buy from):

1) _____
 Name Items Purchased Known how long?

 Street Address City State Zip Code Telephone No.

2) _____
 Name Items Purchased Known how long?

 Street Address City State Zip Code Telephone No.

PERSONAL REFERENCES: (Relatives & Friends):

Name	Address	Phone No. Cell & Home	Occupation	Relationship	Yrs. Known

RESIDENCE:

Present Address: _____
 Street Address City State Zip Code Home Phone

Own _____ Rent _____ How Long? _____ years _____ months

Previous Address _____
 (If less than 5 years) Street Address City State Zip Code

If rent: _____
 Landlord Street City State Zip Manager Telephone No.

MONTHLY INCOME (average)

Salary and/or Fees received \$ _____

Bonus & Commissions \$ _____

Dividends & Interest \$ _____

Real Estate Net Income \$ _____

Business Royalty Income \$ _____

Other Income \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

MONTHLY PAYMENTS (average)

Loan Payments \$ _____

Rent/Lease \$ _____

Taxes (income & property taxes) \$ _____

Living Expenses \$ _____

Guarantor Obligations \$ _____

Unsatisfied Legal Claims/Judgment \$ _____

Liability as an endorser or co-maker of notes \$ _____

Other liabilities (alimony, child support, maintenance, etc.) \$ _____

_____ \$ _____

_____ \$ _____

TOTAL GROSS INCOME

\$ _____

TOTAL EXPENSES

\$ _____

AUTOMOBILES

Make	Model	Color	Year	License Number	Current Value	Financed/Leased By	Telephone Number	Loan Number	Amount Owing	Monthly Payment
					\$				\$	\$
					\$				\$	\$

ACCOUNTS AND NOTES RECEIVABLE

Name, Address and Phone # of Debtor	Maturity Date	Face Value	Monthly Installment Payments	Balance Due	Description of Security
		\$	\$	\$	
		\$	\$	\$	
		\$	\$	\$	

MARITAL STATUS:

Married ____ Divorced ____ Single ____ Separated ____ Widowed ____ . If married, please provide the following:

Spouse's Name _____
 First Middle Last/Maiden Name Cellphone No.

Birthdate _____ Soc. Sec. No. _____ Driver's Lic. No. _____

Spouse's Employer _____ Employed for how long _____
 Company Name

Street Address City State Zip Code Telephone No.

STOCKS, BONDS & SECURITIES

Name of Stock Certificate Holding Company	Account Number	Telephone Number	Address	Approx. Current Total Market Value
				\$
				\$
				\$

BUSINESS:

Are You: _____ Relocating? _____ Expanding? _____ Starting a new business?

Name of Current Business _____ Type of Business _____
 Is it: _____ Corporation _____ Partnership _____ Sole Ownership (PLEASE PROVIDE COPY OF CURRENT BUSINESS LICENSE)

Street Address City State Zip Code Telephone No.

How long in business? _____ Gross Monthly Income _____

Landlord _____
 Street Address City State Zip Code Telephone No.

Proposed business at this location _____ Address of space desired: _____

Detailed description of business/services to be provided _____

List names of all major owners/directors of the organization:

Name _____ Name _____ Name _____

Have you ever filed for bankruptcy (under Chapter 7, 11 or 13) either personally or as a partial owner of an entity? ____ No ____ Yes; If yes, please explain:

A) Are you a defendant in any legal action? Yes No

B) Are there any unsatisfied judgments? Yes No

Have you ever been charged or convicted of a misdemeanor, felony or criminal charge, or pleaded nolo contendere to any charge, or been held liable in a civil action by final judgment, or been the subject of a material complaint or other legal proceedings? Have you ever been charged with civil action, complaint, fraud, embezzlement, fraudulent conversion, restraint of trade, unfair or deceptive practices, misappropriation of property, or comparable allegations? ____ Yes ____ No

If yes, please explain: _____

PRESENT EMPLOYMENT:

Employer/Company _____ Self Employed: Yes ____ No ____

Company Address _____ Phone No. _____

Length of Employment/Ownership ____ years ____ months Job Title (if applicable) _____ Monthly Gross Income \$ _____

PLEASE PROVIDE THE FOLLOWING DOCUMENTS:

- 1.) Copies of personal Tax returns of all principals for the last 2 years (and, if applicable, company Tax returns)
- 2.) Current personal and/or company financial statements
- 3.) Copy of any professional licenses
- 4.) Copy of current business license

EDUCATION:

Encircle the last year of school completed:

High School: 9 10 11 12 College: 1 2 3 4 Graduate School: 1 2 3 4 5 6

College/Graduate School _____ Degree & Year Graduated _____

In case of emergency, notify:

1) Name _____ Address _____ Phone: Home _____
Cell _____
Work _____

2) Name _____ Address _____ Phone: Home _____
Cell _____
Work _____

I certify that the answers given on this application are true and correct and that I have withheld nothing that would, if disclosed, affect this application. I understand that investigative background inquiries are to be made on myself, including consumer credit, driving, civil, criminal, bank statements and verification of deposits and other reports, including various federal, state and other agencies which maintain records concerning my past activities relating to my background. These reports will include information about me and my financial information. I authorize release of any information deemed necessary by Landlord and its designated representative(s) to verify the enclosed information contained or any additional information.

Applicant's Signature _____ Date _____

Spouse's Signature _____ Date _____