The Retail Companies
Real Estate Is Our Passion.

LEASE APPLICATION

Full Name: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Tenant's Proposed Use: _____

Tenant's Entity & Trade Name: _____
        *Please include whether entity will be in the individual name

Previous Operating History/Experience in Retail: _____

_____

_____

Ideal Space Size: _____ **Projected Annual Sales Volume: _____**

What Tenant proposes to pay? _____

Who is the ownership team?   _____

What other locations do you have? _____

_____

Why do you want to open a new location?

_____

_____

_____

Why do you want to open a new location at this property?

_____

_____

_____

Please add any additional information you think would help ownership understand the proposed use:

_____

_____

_____

ATTACH THESE ITEMS TO THE APPLICATION WHEN SUBMITTING:

☐   **BUSINESS PLAN**

☐   **PHOTOS OF CURRENT LOCATION(S)**

☐   **RENDERINGS / IDEAS OF WHAT NEW STORE WILL LOOK LIKE**

☐   **ANYTHING ELSE YOU CAN SHARE FOR WHAT YOU ARE PLANNING**

Contact Information Form
Shopping Center:

The Retail Companies

INDIVIDUAL INFORMATION

1. Name: _____
2. Date of birth: _____
3. Social security number (required for lease): _____
4. Marital status: _____
5. Name of spouse: _____
6. Spouse date of birth: _____
7. Spouse's social security number: _____
8. Number of dependents: _____

9. Contact Info:	Direct Phone:
	Mobil Phone:
	Fax:
	Email:
	Address:

EMPLOYMENT INFORMATION

10. Name of employer: _____
11. Employer's address: _____
12. Responsibilities: _____
13. Years with employer: _____
14. May we contact your employer? _____
15. A resume is attached (not required): Attached Yes / No

BUSINESS INFORMATION

16. Business legal entity tenant name: _____
17. Trade name: _____
18. If a corporation, state of incorporation: _____
19. Federal ID#: _____
20. If a corporation, name(s) of individual(s) gauranteeing lease obligations: _____
_____
21. Address for delivery of documents: _____
_____

REFERRALS

Name, company, phone number: _____
Name, company, phone number: _____
Name, company, phone number: _____

CREDIT AUTHORIZATION

The foregoing statement is true and correct and may continue to be considered at least as favorable as shown until otherwise notified in writing by the undersigned. This application is to acknowledge that during Landlord's consideration of any Lease Agreement, a credit investigation and background report may be done on each individual and/or entity that will be signing the Lease Agreement. Your signature below grants Landlord complete permission to obtain such reports at Landlord's expense.

I do hereby grant permission to obtain a credit and/or background report.

Signed
Social Security #
Date:

Signed
Social Security #
Date:

*Please include photos of any existing locations you may own/operate.

Name	
Trade Name:	
Shopping Center:	

(I, We) make the following statement of all (my, our) assets and liabilities as of the_____ day of _____, 20_, and give other material information for the purpose of obtaining credit with you on notes and bills bearing (my,our) signature endorsement or guarantee and agree to notify you promptly of any change affecting (my, our) ability to pay.

ASSETS SOLELY OWNED (List here only those assets NOT jointly owned)		ALL LIABILITIES AND NET WORTH (List here all liabilities joint or otherwise)	
Cash (See Sched. 1)		Notes Payable to Banks, Unsecured (See Sched 1)	
U.S. Government Securities		Notes Payable to Banks, Secured (See Sched 1)	
Listed Stocks and Bonds (See Sched. 4)		Notes Payable to Others, Unsecured	
Unlisted Stocks and Bonds (See Sched. 4)		Notes Payable to Others, Secured	
Accounts and Loans Receivable (See Sched. 2)		Loans Against Life Insurance (See Sched. 3)	
Life Insurance - Cash Value (See Sched. 3)		Mortgages Payable on Real Estate (See Sched 5)	
Real Estate (See Sched. 5)		Accounts Payable	
Automobiles		Interest Payable	
401K & Money Market Accounts		Estimated Capital Gains Tax	
Other Assets (Itemize)		Other Taxes and Assessments Payable	
		Other Liabilities	
		Total Liabilities	
		Net Worth (= Assets - Liabilities)	
TOTAL ASSETS SOLELY OWNED		**TOTAL OF ALL LIABILITIES AND NET WORTH**	
JOINTLY OWNED ASSETS (Summarize here; Itemize on Sched. 6)		SOURCE OF INCOME	
Cash (See Sched. 1)		Salary	
U.S. Government Securities		Bonus and Commissions	
Listed Stocks and Bonds (See Sched. 4)		Dividends	
Unlisted Stocks and Bonds (See Sched4)		Real Estate Income	
Accounts and Loans Receivable (See Sched.2)		Other Income (Itemize):	
Life Insurance - Cash Value (See Sched 3)			
Real Estate (See Sched. 5)		**TOTAL INCOME**	
Automobiles			
Other Assets (Itemize):			
Estimated Household Items Not Included:			
(Furniture, Jewelry, Electronics - $50,000 -$75,000)			
		PERSONAL INFORMATION	
		Partner or Officer in any other venture?	
TOTAL JOINTLY OWNED ASSETS		If yes, please explain.	
TOTAL OF ALL ASSETS			

Have you ever taken bankruptcy, made a composition settlement, or are you a defendent in any legal action? Explain.
Do you have any contingent liabilities personally or as co-maker, on leases or contracts, or Federal Income Tax Liability? Explain.
Do you have a will? And if Yes, who is named as your executor?

Name:	
Trade Name:	
Shopping Center:	

No. 1 - Cash (Attach Schedule if necessary)

Name of Bank	Type of Acct.	Acct. Number	Last Statement	Cash Balance	Name(s) on Account

No. 2 - Accounts, Loans and Notes Receivable (Attach Schedule if necessary)

Name and Address of Debtor	Amount Owed	Age of Debt	Down Payment	Description or Nature of Debt	Description of Security Held

No.3 - Life Insurance (Attach Schedule if necessary)

Owner of Policy	Beneficiary	Insurance Co.	Face Value of Policy	Total Cash Surrender Value	Total Value of Loans on Policy	Policy Assigned

No. 4 - Stocks & Bonds (Attach Schedule if necessary)

Face Value or # of Shares	Description of Security	Registered in Name of	Original Cost	Present Market Value	To Whom Pledged

No. 5 - Real Estate (Attach schedule if necessary)

Address	Title in Name of:	Mortgages or Liens	Amount Payments	Original Cost	Present Market Value	Taxes Current

No.6 - Jointly Owned Property - Details of summary on front page. (Attach schedule if necessary)

Assets	Value	Name of Joint Tenant
	$	