



**LEASE APPLICATION - TENANT INFORMATION**

**PLEASE ANSWER ALL QUESTIONS, INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL**

SECTION 1 PROPERTY AND BUSINESS INFORMATION (PLEASE TYPE OR PRINT CLEARLY)	
Property Name	
Property Location	
Type of Business Proposed	
Business Trade Name	
Business Structure (Individual, Corporation, Partnership)	
Authorized Representatives of Business	
Approximate Size needed for Business	
<i>PLEASE INCLUDE ANY ADDITIONAL INFORMATION (BUSINESS PLAN, RESUME, FINANCIAL PROJECTIONS, PICTURES, ETC.) THAT YOU THINK WOULD BE VALUABLE TO US IN UNDERSTANDING YOUR GOALS AND EXPECTATIONS FOR THE BUSINESS</i>	

SECTION 2 APPLICANT INFORMATION (PLEASE TYPE OR PRINT CLEARLY)		
Applicant Name		
Social Security Number	Drivers License Number	Date of birth
Home Address		
Home Phone Number	Home Email Address	
Business Name and Address		
Business Phone Number	Business Email Address	
Are You (check one) ? Starting a new Business ? Relocating an Existing Business ? Expanding Present Business		
Do You Own Your Own Business Now? ? Yes ? No		
If Yes: Length of Time Owning Business	Name of Landlord	
If No: Length of Time in Job	Name of Employer	

SECTION 3 CREDIT AUTHORIZATION		
<p>I, _____, do hereby give my full consent to GL Commercial, its parent or subsidiary companies, agents, subagents or associates (collectively, "Owner") to investigate the credit rating(s) of me and/or my businesses and to obtain any credit reports deemed necessary by GL Commercial, for the express purpose of establishing my past, present and future credit position and financial credibility so that Owner may make a determination as to whether and on what terms Owner is interested in entering into lease negotiations with me and/or my business on any real property controlled by Owner.</p>		
Signature (Applicant)	_____	Signature (Co-Applicant) _____
Name (Applicant):	_____	Name (Co-Applicant) _____
Date Signed	_____	Date Signed _____



**LEASE APPLICATION - PERSONAL FINANCIAL STATEMENT**

SECTION 1 Applicant INFORMATION (Type or Print)		SECTION 2 Co-applicant INFORMATION (Type or Print)	
Name		Name	
Date of Birth	Social Security #	Date of Birth	Social Security #
Residence Address		Residence Address	
City, State & Zip		City, State & Zip	
Position / Occupation	Number of years	Position / Occupation	Number of years
Employer Name		Employer Name	
Res. Ph	Bus. Ph.	Res. Ph	Bus. Ph.
Nearest Relative Not living with Me	Relationship:	Nearest Relative Not living with Me	Relationship:
Address	Phone	Address	Phor

SECTION 3 – STATEMENT OF FINANCIAL CONDITION AS OF ____					
Indicate "A" (Applicant), "C" (Co-applicant) or "J" (Jointly held w/others) beside assets and liabilities to indicate to whom item applies					
Assets	A,C or J	\$ Amount	Liabilities	A,C or J	\$ Amount
Cash on hand and in banks-Schedule A			Notes payable to banks – secured- Schedule E		
IRAs 401K & Retirement Assets			Notes payable to banks – unsecured- Sched. E		
U.S. Gov't & Marketable Securities –Schedule B			Due to brokers – margin loans-Schedule E		
Securities held by broker in margin accounts			Amounts payable to others – secured		
Restricted or Control Stocks (public Co. only)			Credit Cards- Schedule E		
Real Estate Owned – Schedule C			Equity Lines- Schedule E		
Loans Receivable			Unpaid Taxes ( Income, Property, Etc.)		
Cash value-life insurance – Schedule D			Real estate mortgages payable – Schedule C		
Value of Closely Held Business			Other Debts – Itemize		
Automobiles and other personal property					
Other Assets- Itemize					
			<b>TOTAL LIABILITIES</b>		<b>\$0</b>
			<b>NET WORTH</b>		<b>\$0</b>
<b>TOTAL ASSETS</b>		<b>\$0</b>	<b>TOTAL LIABILITIES AND NET WORTH</b>		<b>\$0</b>

INCOME FOR YEAR ENDED: _____	Applicant	Co-Applicant	EXPENSES:
Salary			Rent Payment
Bonuses and Commissions			Alimony
Interest & Dividends			Child support
Rental income			Tuition
Other income (Alimony, or child support need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)			<b>PERSONAL INFORMATION (both applicant and co-applicant)</b>
TOTAL INCOME			Are you a US Citizen?
CONTINGENT LIABILITIES			Do you have a will? _____ If so, name of executor:
Do you have any contingent liabilities? If so, describe			Are you a partner or officer in any other venture? If so, describe
As endorser, co-maker or guarantor?			Income tax settled through (date)
On leases or contracts?			Are any assets pledged other than as described on schedules? If so, describe
Legal claims			Are you a defendant in any suits or legal actions? If so, describe
Other special debt			Have you or your businesses ever been declared bankrupt?
Amount of contested income tax liens			

(Complete Schedules and Sign on Next Page)

Schedule A – Cash and Investments				
Type of Account	Name of Bank or Broker	In Name Of	Are These Pledged?	Current Balance

Schedule B – U.S. Government & Marketable Securities					
Number of Shares	Description	In Name Of	Are These Pledged?	Date of Value	Value

Schedule C – Real Estate Owned						
-1- Address Of Property	-2- Property Description—			-3- Cost	-4- Date Acquired	-5- Current Market Value
	Type	USE	Size			
1						
2						
3						
4						

-6- Name of Lender	-7- Title In Name Of	-8- Mortgage Balance	-9- Monthly Payment	-10- Monthly Rental Income	-11- Ownership Percentage
1					
2					
3					
4					

Schedule D – Life Insurance Carried, Including Whole Life and Group Insurance					
Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

Schedule E – Banks or Finance companies where Credit Has Been Obtained						
Name of Lender	Collateral Description	Type (Line of Credit, term loan)	Maximum Line Amount	Monthly payment	Current Balance	Maturity

The undersigned hereby executes this Personal Financial Statement on the date(s) listed below and warrants and represents to GL Commercial, its principals, assigns and representatives that the foregoing is true and accurate in all material aspects.

Customer Signature ( Applicant ) \_\_\_\_\_

Signature (Co-applicant ) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Signed \_\_\_\_\_

Date Signed \_\_\_\_\_



1600 Sawgrass Corporate Parkway Suite 400  
Sunrise, FL 33323  
954-753-1730

**PLEASE COMPLETE AND RETURN TO:**  
**MIKE.FRIEDMAN@GLCOMMERCIAL.COM**

**BUSINESS PLAN**

FORM OF OWNERSHIP: \_\_\_\_\_

COMPANY HISTORY:

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DESCRIBE PRODUCTS OR SERVICES:

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IDENTIFY CHARACTERISTICS AND LOCATIONS OF CUSTOMER BASE:

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WHO IS YOUR COMPETITION:

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WHAT FACTORS GIVE YOUR BUSINESS A COMPETITIVE ADVANTAGE:

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