

Please fill out the form and send, email, or fax the statement back to Pepitone Properties Corp or their representative. It is understood that the Broker, its agents, and officers, will hold this information in strict confidence. **NEED A FORM FOR EACH APPLICANT – PARTNER - ETC.**

Financial Statement – Strictly Confidential

Name: _____ Phone: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

ASSETS

Cash on Hand in Banks.....	\$ _____
U.S. Government Securities.....	\$ _____
Account, Loans and Notes Receivable.....	\$ _____
Cash Surrender Value of Life Insurance.....	\$ _____
Value of Businesses Owned.....	\$ _____
Other Stocks and Bonds.....	\$ _____
Real Estate.....	\$ _____
Automobiles – Number (_____).....	\$ _____
Household Furnishings and Personal Effects.....	\$ _____
<u>Other Assets Itemized Below:</u>	
_____	\$ _____
_____	\$ _____
<u>TOTAL ASSETS</u>	\$ _____

LIABILITIES

Notes Payable.....	\$ _____
Liens on Real Estate.....	\$ _____
<u>Other Liabilities Itemized Below:</u>	
_____	\$ _____
_____	\$ _____
<u>TOTAL LIABILITIES</u>	\$ _____

NET WORTH

TOTAL ASSETS – TOTAL LIABILITIES \$ _____

SOURCE OF INCOME

Salary.....	\$ _____
Dividends and Interest.....	\$ _____
Bonus and Commissions.....	\$ _____
Real Estate Income.....	\$ _____
Other Income: _____	\$ _____
<u>TOTAL INCOME</u>	\$ _____

The undersigned certifies that this information is true and correct.

Signature: _____ Date: _____

SALE ONLY - PROOF OF FUNDS MUST BE SUBMITTED WITH RETURN OF THIS FORM!

The above information is freely given and represents a true and correct representation of my financial condition. If necessary, a credit report may be obtained or other information as necessary on the individuals or business named in this application such as signed original personal and corporate financials.

I authorize Pepitone Properties Corp. or its representatives to verify all information contained herein by contacting the sources listed or any other sources available. This information shall remain the property of the recipient whether or not the offer to purchase or lease is accepted, and the recipient believes that all information shall be kept as confidential as possible.

Signature of Applicant _____ Date _____

Signature of Spouse/co-applicant _____ Date _____

PERSONAL INFORMATION (enclose copy of each driver's licenses) * Mandatory

Name of Applicant: _____

E-Mail Address: _____

Partner's Name (if applicable): _____

*Soc. Sec. #: _____ *Date of Birth: _____

Home Address-Full: _____

Name of Company: _____

Work Address: _____

Home Telephone: _____ Work Telephone: _____

Spouse's Name: _____ *Soc. Sec. #: _____

*Date of Birth: _____ Work Telephone: _____

Household, do you? Own Rent How Long

Are you a U.S. Citizen? If No, what country? _____

Landlord or Mortgage Holder: _____

II. BUSINESS CONCEPT

Corporate Name, If Any: _____

(Please attach copy of Corporate Charter)

Tax I.D. #: _____

If more than one Corporate Name, please list: _____

Doing Business As: _____

(Please attach copy of Fictitious Name Certificate)

State of Incorporation: _____

Premises to be used for: _____

New Business: _____

Existing Business: _____

Franchise: _____

How many stores of this type of business are you currently operating? _____

What percent of the equity in the above business (es) do you own? _____ %

What business (es) do you currently have an interest in? _____

Who will be responsible for the daily operation of this store? _____

How many stores do you plan to open this year? _____

How long have you been in this business? _____

Describe business experience: _____

Have you ever been adjudicated as bankrupt? _____

Have you ever been convicted of a felony? _____

Have you any judgements or legal proceedings pending against you? _____

If yes, please state details: _____

Do you carry Business Interruption Insurance (if so explain)? _____

REAL ESTATE REFERENCES

Present Location(s):

1. _____ S/F _____ How Long? _____

2. _____ S/F _____ How Long? _____

Present Landlord (s): (Include Name, Address, and Telephone Number)

1. _____

2. _____

Source of Funding for Start-Up Cost:

Cash: _____

Loan: _____

_____ (Lender)

_____ (Address)

_____ (Telephone)

IV. FINANCIALS (Please attach signed original personal and corporate financials)

Bank References (2):

1. _____ (Name and Address)

_____ (Contact Name and Phone Number)

2. _____ (Name and Address)

_____ (Contact Name and Phone Number)

Business Credit References (2):

Contact Name, Address, Phone: _____

Contact Name, Address, Phone: _____

You are hereby authorized to make all inquiries deemed necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. necessary, a credit report may be obtained or other information as necessary on the individuals named in this application.

Office Only: Lee Clerk & Other Checks Completed _____ By _____