

**NEW CLIENT INFORMATION SHEET – BUYER OR LESSEE**

**I. PERSONAL INFORMATION (SUBMIT A FORM FOR EACH APPLICANT AND/OR PARTNER, ETC.)**

Name of Applicant: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Partner's Name (if applicable): \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_  
Spouse's Name: \_\_\_\_\_ 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: \_\_\_\_\_  
If more than one Corporate Name, please list: \_\_\_\_\_  
Doing Business As: \_\_\_\_\_  
State of Incorporation: \_\_\_\_\_  
Premises to be used for:  
New Business \_\_\_\_\_ Existing Business \_\_\_\_\_ Franchise \_\_\_\_\_  
Planned Use:  
\_\_\_\_\_  
\_\_\_\_\_  
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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Office Only: Lee Clerk & Other Checks Completed \_\_\_\_\_ By: \_\_\_\_\_