

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 _____