



VESTIS GROUP

4331 N 12th St, Ste 101, Phoenix, AZ 85014

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Designated Broker: Natan Jacobs

APPLICATION FOR COMMERCIAL LEASE

This is a legally binding contract. If not understood, seek competent advice before signing.

SUMMARY OF TERMS

Date	Occupancy Date	Lease Expiration
Applicant	Monthly Rent	Term of Lease
Landlord	Security Deposit	Date Received
Premises		Date Received

BUSINESS ENTITY

Name of Business & any T/A's		Federal Tax ID (EIN) #	
Type of Business Entity		Date of Incorporation	
Phone (Office)		Phone (Mobile)	
Website			
Current Address		Previous Address	
Own/Rent	Years	Own/Rent	Years
What does/will your business do?			
Annual Gross Revenue (If new business, use projected)			
Other Income		Source	
Names of Owners & Principals of Company		Addresses & Phone #'s	

PERSONAL GUARANTEE

Personal Guarantors Name (Not Business Name)		Social Security #	
Date of Birth	Phone (H)	Phone (W)	
Phone (Mobile)	Email Address		
Current Address		Previous Address	
Own/Rent	Years	Own/Rent	Years
Employer		Employer's Address	
Position	Length of Time	Gross Annual Salary	
Other Income		Source	
Emergency Contact / Relationship		page	

REFERENCES

Reference 1 / Relationship	Contact Info
Reference 2 / Relationship	Contact Info
Reference 3 / Relationship	Contact Info

BUSINESS INFORMATION

Please complete the following and attach additional information regarding your related background and business plans.

What background do you have in this business? (Please attach a resume if available)		
How do you plan to generate business?		
How many locations do you currently operate?		
Do you have expansion plans?	Yes	No
How much do you estimate you will initially spend to build-out the Premises?		
What level of Annual Gross Sales/Receipts do you feel you need:		
To stay in business?		
To be satisfied in business?		
To be extremely pleased with business?		

FINANCIAL INFORMATION

Assets	In Even Dollars
Cash on hand and in Banks (See Schedule A)	
U.S. Government Securities (See Schedule B)	
Listed Securities (See Schedule B)	
Unlisted Securities (See Schedule B)	
Other Equity Interests (See Schedule B)	
Accounts and Notes Receivable	
Real Estate Owned (See Schedule C)	
Cash Value Life Insurance (See Schedule D)	
Other Assets (Itemize)	
TOTAL ASSETS (A)	

Liabilities	In Even Dollars
Notes Payable: This Bank (Schedule A)	
Notes Payable: Other Institutions (Schedule A)	
Notes Payable: Relatives	
Notes Payable: Others	
Accounts and Bills Due	
Unpaid Taxes	
Real Estate Mortgages Payable (See Schedule C)	
Life Insurance Loans (See Schedule D)	
Other Liabilities (Itemize)	
TOTAL LIABILITIES (B)	

Net Worth	
Total Assets (A)	
(Total Liabilities) (B)	
TOTAL NET WORTH	

Schedule A: Banks, Brokers, Savings & Loan Association, Finance Companies or Credit Unions

List the names of all institutions at which you maintain a deposit account and/or where you have obtained loans.

<i>Name of Institution</i>	<i>Name on Account</i>	<i>Balance On Deposit</i>	<i>High Credit</i>	<i>Amount Owning</i>	<i>Monthly Payment</i>	<i>Secured By What Assets?</i>
TOTAL			TOTAL			

Schedule B: U.S. Governments, Stocks (Listed & Unlisted), Bonds (Gov't & Comm.), and Partnership Interests (General & Ltd.)

No. of Shares, Face Value (Bonds), or % of Ownership	Indicate: 1. Agency or name or company issuing security or name 2. Type of investment or equity classification 3. Basis of Valuation*	In Name Of	Market Value*	Pledged	
				Yes	No
TOTAL					

*If unlisted security or partnership interest, provide current financial statements to support basis for valuation.

Schedule C: Real Estate Owned (and Related Debt, if Applicable)

Description of Property or Property Address	Title in Name of	Date Acquired	Cost + Improvements	Present Market Value	Mortgage or Land Contract Payable		
					Bal. Owning	Mo. Pmt.	Holder
TOTAL							

Schedule D: Life Insurance Carried

Name of Company	Face Amount	Cash Surrender Value	Loans	Beneficiary
TOTAL				

The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with Landlord. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify Landlord of said change(s) and unless Landlord is no notified, it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we authorize Landlord to make whatever credit inquiries it deems necessary in connection with this financial statement. I/we authorize and instruct any person or consumer reporting agency to furnish to Landlord any information that it may have or obtain in response to such credit inquiries.

I/we also hereby certify that no payment requirements listed herein are delinquent or in default except as follow; if "NONE: so state.

I/we fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, pursuant to 18 U.S.C. Section 1014.

Applicant Signature _____ Date _____ Social Security # _____ Date Of Birth _____

Printed Name _____

Spouse Signature _____ Date _____ Social Security # _____ Date Of Birth _____

Printed Name _____