



Thank you for applying to lease with us. Please provide us with *all the information requested below*. Incomplete information will only delay the processing of your Lease Application. PLEASE FILL IN THE FORM ON LINE AND PRINT/OR PRINT FORM FIRST AND PRINT CLEARLY BY HAND. **One application per applying individual.** Once completed, please deliver to our office with the necessary fees and additional requested documents to process your application. WE CANNOT PROCESS THIS APPLICATION ON-LINE. For your convenience, a map is located on the *Contacts* page of this website.

• Property Address Interested in Leasing _____

COMPANY INFORMATION

Business Name _____

DBA _____

Entity Type (select one) Proprietorship/Partnership (General) California Limited Partnership S-Corporation (State: _____)
 C-Corporation (State: _____) Limited Liability Company (LLC) Limited Liability Partnership (LLP)

Please attach with this application:

- The last two (2) years Federal/State tax returns.
- Financial Statements (a current balance sheet, profit and loss statement for YTD and the preceding two (2) fiscal years).

Federal Tax I.D. # _____ Date business established _____

Type of business _____

Current Address _____ City, State, Zip _____

Current Phone _____ Current Fax _____ Other _____

Current Email address _____

How long at this address _____ Rent Lease Own

Lessor name _____ Lessor phone number _____

Monthly lease amount \$ _____ Term of Lease _____ Occupancy Length _____

Previous Business Addresses (Please provide complete information for the preceding five (5) years.)

Address _____ City, State, Zip _____

Lessor name _____ Lessor phone number _____

Monthly lease amount \$ _____ Term of Lease _____ Occupancy Length _____

Address _____ City, State, Zip _____

Lessor name _____ Lessor phone number _____

Monthly lease amount \$ _____ Term of Lease _____ Occupancy Length _____

OFFICER | PARTNER | OWNER INFORMATION

First name _____ Middle _____ Last _____ Sr./Jr./ etc.: _____

Address _____ City, State, Zip _____

Position _____ Social Security Number _____ Date of Birth _____

Equity % _____ Contact phone number _____ Contact phone number _____

First name _____ Middle _____ Last _____ Sr./Jr./ etc.: _____

Address _____ City, State, Zip _____

Position _____ Social Security Number _____ Date of Birth _____

Equity % _____ Contact phone number _____ Contact phone number _____

First name _____ Middle _____ Last _____ Sr./Jr./ etc.: _____

Address _____ City, State, Zip _____

Position _____ Social Security Number _____ Date of Birth _____

Equity % _____ Contact phone number _____ Contact phone number _____

PARENT COMPANY INFORMATION

Name of business _____

Full Address _____

Phone numbers _____

Federal Tax I.D. # _____ Date business established _____



COMPANY FINANCIAL INFORMATION

Business Banking Accounts

Bank name _____

Checking Savings Account # _____ Checking Savings Account # _____

Bank/Branch address _____

Bank/Branch phone number _____ Bank contact _____

Bank name _____

Checking Savings Account # _____ Checking Savings Account # _____

Bank/Branch address _____

Bank/Branch phone number _____ Bank contact _____

Business Credit Accounts

Name _____ Account # _____

Address _____

Phone number _____ Contact _____

Name _____ Account # _____

Address _____

Phone number _____ Contact _____

Name _____ Account # _____

Address _____

Phone number _____ Contact _____

Name _____ Account # _____

Address _____

Phone number _____ Contact _____

COMPANY FINANCIAL STATEMENT

The following information is a statement as of _____ (date). The information provided and supporting schedules is the most current financial information available concerning the Leasing Entity and there have been no significant changes. PLEASE ENTER THE LIABILITIES AS A 'NEGATIVE' NUMBER FOR THE MATH TO WORK.

Revenue	Amount
Rental Income: _____	\$ _____
Other Income: _____	\$ _____
Other Income: _____	\$ _____
Other Income: _____	\$ _____
Other Income: _____	\$ _____
Total Revenue	\$ _____

Expenses	Amount
Operating Expenses _____	\$ _____
Other Expense: _____	\$ _____
Other Expense: _____	\$ _____
Other Expense: _____	\$ _____
Other Expense: _____	\$ _____
Total Expenses	\$ _____

Assets	Amount
Cash in: _____	\$ _____
Cash in: _____	\$ _____
Marketable Securities Owned	\$ _____
Receivables	\$ _____
Real Estate Owned from Schedule of Real Estate	\$ _____
Other Assets: _____	\$ _____
_____	\$ _____
_____	\$ _____
Total Assets	\$ _____

Liabilities	Amount
Revolving Credit	\$ _____
Installment Credit Obligations	\$ _____
Real Estate Debt from Schedule of Real Estate	\$ _____
Other Liabilities: _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Liabilities	\$ _____

Total Net Worth (total Assets minus total Liabilities) \$ _____



EMERGENCY INFORMATION

Name _____
Address _____
Phone number _____

MISCELLANEOUS INFORMATION

Has this business, its officers, partners or owners, ever been delinquent in payment of any financial obligation(s)? [] no [] yes - please explain

Has this business, its officers, partners or owners, ever been a defendant in an unlawful detainer and/or breach of contract lawsuit?

[] no [] yes - please explain

Has this business, its officers, partners or owners, ever been the subject of bankruptcy proceedings? [] no [] yes - please explain

Authorization is hereby granted to The Becker Group, Inc. (Lessor) or Lessor's Agent to obtain information regarding checking accounts, savings accounts, and/or outstanding credit or credit records - all information on this application. Authorization is further granted to Lessor or its Agent to use a photocopy of facsimile of the authorized signature below to obtain information regarding any of the aforementioned items. It is understood that information that does not verify, or cannot be verified, may result in this application not being approved, and that the \$40 fee paid for verification of this application is a non-refundable fee, regardless of whether or not this application to lease is approved or denied.

Applicant Signature _____ Title _____ Date _____

Applicant Signature _____ Title _____ Date _____

Applicant Signature _____ Title _____ Date _____

MISCELLANEOUS INFORMATION

Multiple horizontal lines for miscellaneous information input.

Office Use Only

Application Approval/Denial

[] Approved [] Denied

Property Mgr _____

Date _____

Remarks _____