

Personal Financial Statement

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Full Name	Spouse's Full Name (if applicable)
Social Security Number	Spouse's Social Security Number
Date of Birth	Spouse's Date of Birth
Residence Address	Spouse's Residence Address <i>(if different)</i>
City, State & Zip Code	City, State & Zip Code
Home Phone Number ()	Spouse's Home Phone Number ()
Your Employer or Business Name	Spouse's Employer or Business Name
Address	Address
City, State & Zip Code	City, State & Zip Code
Professional licenses held by you	Professional licenses held by spouse
Renewal dates	Renewal dates

ASSETS (Omit Cents)	LIABILITIES (Omit Cents)
Cash on hand & in Banks.....\$ _____	Accounts Payable\$ _____
Savings Accounts.....\$ _____	Notes Payable to Banks and Others.....\$ _____ <small>(Describe in Section 2)</small>
IRA or Other Retirement Account.....\$ _____	Installment Account (Auto).....\$ _____ Mo. Payments \$ _____
Accounts & Notes Receivable.....\$ _____	Installment Account (Other).....\$ _____ Mo. Payments \$ _____
Life Insurance-Cash Surrender Value Only.....\$ _____ <small>(Complete Section 8)</small>	Loan on Life Insurance.....\$ _____
Stocks and Bonds.....\$ _____ <small>(Describe in Section 3)</small>	Mortgages in Real Estate.....\$ _____ <small>(Describe in Section 4)</small>
Real Estate.....\$ _____ <small>(Describe in Section 4)</small>	Unpaid Taxes.....\$ _____ <small>(Describe in Section 6)</small>
Automobile-Present Value.....\$ _____	Other Liabilities.....\$ _____ <small>(Describe in Section 7)</small>
Other Personal Property.....\$ _____ <small>(Describe in Section 5)</small>	Total Liabilities.....\$ _____
Other Personal Property.....\$ _____ <small>(Describe in Section 5)</small>	Net Worth.....\$ _____
Other Assets.....\$ _____ <small>(Describe in Section 5)</small>	Total\$ _____
Total\$ _____	

Section 1. Source of Income	Contingent Liabilities
Salary.....\$ _____	As Endorser or Co-Maker.....\$ _____
Net Investment Income.....\$ _____	Legal Claims & Judgments.....\$ _____
Real Estate Income.....\$ _____	Provision for Federal Income Tax.....\$ _____
Other Income (Describe below)*.....\$ _____	Other Special Debt.....\$ _____

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Note Holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/ Exchange	Date of Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

Section 9. Payment Terms

Proposed Payment Amount: \$ _____

To Be Paid: semimonthly on the ____ and ____ monthly biweekly **Starting** _____ (date)

I authorize Landlord to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____

Consent To Credit / Background Check

I, _____, the undersigned applicant(s) authorize Landlord, or his/her/their agent to order and review my/our credit and criminal history and investigate the accuracy of the information contained in the application and authorize and consent for full release of records (either orally or in writing), without reservation to any party or agency contacted by this rental institute to furnish the above-mentioned information. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to lease application Background Resources Inc. may provide you with a copy of the consumer report and a description in writing of your rights under the Federal Fair Credit Reporting Act.

Signature: _____

Date: _____