

# **CREDIT REVIEW**

# Prospective Tenant:

Thank you for your interest in leasing space with Dinerman Group, LLC. We perform a thorough credit evaluation of our tenants and request that you provide us with the following:

### Entities:

- Complete a Lease Application (Form included)
- Previous two years' year-end balance sheet and income statement
- Most recent year-to-date balance sheet and income statement
- Build-out budget for proposed space (updated and more specific as we move to lease execution)
- Business Plan (if a start-up, a forecast of income and expenses should be made showing the first year(s) of operation noting funding sources)
- \$75 Lease Application Fee paid by check or online at dinerman.twa.rentmanager.com/applynow

Individuals/Guarantors (personal guarantees will be required if not an existing business or inadequate signing entity):

- Complete Lease Application (Form included)
- Last two years' personal tax returns (support schedules unnecessary)
- Personal financial statement (form included)
- Supporting documentation for any listed assets on your personal financial statement (recent bank and brokerage statements, real estate tax assessments, etc.)
- Copy of current Driver's License
- \$75 Lease Application Fee paid by check or online at dinerman.twa.rentmanager.com/applynow

All information will be kept strictly confidential. Timely submission of ALL documentation will hasten the leasing process. Information can be submitted via e-mail, facsimile, or postal service (please indicate tenant name, and property in all correspondence):

Dinerman Group, LLC 581 Village Trace NE Building 12A-Suite 250 Marietta, GA 30067 Fax: (404) 631-6352 Justin@dinermangroup.com

We appreciate the opportunity to serve your needs.

Best Regards,

Dinerman Group, LLC



COMP	any Nai	ME:	Phone:				
Busine	ss Addre	ess:					
City, St	tate, Zip	:					
E-mail	address	Ye	ars in Business:	Years at Current Loc	ation:		
Size of	Current	Premises: Curi	ent Rent:	Number of Em	oloyees:		
Present	t Landlo	rd:		Phone:			
Propos	ed Use c	of Premises:					
Will ar	ıy Hazar	dous Materials be Stored or used on th	e Premises? Yes No	o☐ If yes, please at	tach list (i.e. MSDS sheets)		
TYPE (	OF BUSIN	NESS ORGANIZATION: (Complete A,	B or C) [Please	attach Financial Inf	ormation noted below.]		
A.	SOLE I	PROPRIETORSHIP:					
	1.	Owner's Name:		Phone:			
		Residence Address:			Zip Code:		
		Do you Own or Rent ?	For How Long?				
		Social Security No:	Driver's	License No:			
В.	PARTN	ERSHIP:					
l	1.	Name:		Social Security	No.:		
l		Residence Address:					
l				Phone:			
l	~						
l	2.	Name:		Social Security	No.:		
I		Residence Address:		TN1			
				Phone:			
true and terminate individue Signatu	l correct. ted at any inal credit in ture:	you hereby declare that the representation of a If any information herein contained is false, time. By signing below, you authorize the Lanformation, now or any time during the lease to	the lease made on strength andlord to verify the above of term. Print Name:	of this application may, statements including, bu	at the option of Landlord, be to not limited to, business and  Date:		
1000000	200			w -			
C.					State of Incorp.:		
	∐ Par	ent Corp.:	Divisio:	n/Subsidiary of:			
	Corpo	RATE OFFICERS:					
l	1.	Name:		Title:			
		Residence Address:					
ı				Phone:			
ı	2.	Name:					
I	2.	Residence Address:		1100.			
I		residence readess.		Phone:			
foregoing lease ma to verify Signatu	g applicate ade on stre the above	you hereby declare that you have been given ion, and that these facts are considered part of ngth of this application may, at the option of L estatements including, but not limited to, busin	the lease and are true and co andlord, be terminated at an aess credit information, now	ion listed above to represorrect. If any information by time. By signing below or any time during the b	n herein contained is false, the w, you authorize the Landlord lease term.		
1 1 11110 1 4				1100.			

LEASE GUAR Residence Ad	ANTOR:dress:		Social Security No.:					
			Social Security No.:					
By signing below true and correct. terminated at any information, now Signature:	w, you hereby declare that the If any information herein time. By signing below, yow or any time during the learn	ne representation of facts contained in to contained is false, the lease made on the authorize the Landlord to verify the seterm.  Print Name:	he foregoing application are constrength of this application manabove statements including, but	y, at the option of Landlord, at not limited to, individual cre  Date:				
		Print Name:		Date:				
BANK REFER		D 1	A					
		Branch: Branch:	Account No Account No.	: :				
CREDIT REFI		Account No.	Phone	Contact				
2								
2. 3. 4.								
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2	NFORMATION:  2 Years of business f independent account	inancial statements, including ba						
2	2 Years of business f independent account Authorization for ent	inancial statements, including ba						
2	2 Years of business f independent account Authorization for ent	inancial statements, including ba tering into the transaction.						
2	2 Years of business f independent account Authorization for ent LS: 2 Years of personal t	inancial statements, including ba tering into the transaction.	alance sheet and income st					



# **Personal Financial Statement**

Answer all questions using "no" or "none" where necessary.

Please begin by completing schedules on reverse side.

Personal Information			Date of statement					
Name (first, middle, last)		Birthdate	Social security number					
Home address (include apt.)		City, State, Zip	How long?					
Phone number	Fax number	E-mail address						
Business/Employer	1	Title/Position	How long?					
Business address		City, State, Zip	Phone number					
Do you have any dependents? If yes, list ages		Do you have a will? If yes, name of executor						
Have you ever taken bankruptcy? If yes, explain		Are you a defendant in any suits or legal actions?						
Joint statement, list names of individuals whose assets, liabilities an included	d income are							
Present Landlord (if applicable) Address & Phone number								
Assets		Liabilities						
Cash, on hand and unrestricted in banks from below	\$	Notes payable to banks Schedule 1	\$					
Accounts/Notes-receivable Schedule 2	\$	Notes and accounts due others Schedule 1	\$					
Cash surrender value life insurance. (Do not deduct loans) Schedule3	\$	Loan(s) against life insurance Schedule 3	\$					
Listed (AMEX, NYSE) stocks, bonds, US Govt. Securities Schedule 4	\$	Brokers margin accounts	\$					
Other stocks and bonds Schedule 4	\$	Taxes accrued but unpaid	\$					
Real Estate at cost or market value Schedule 5	\$	Mortgages payable on real estate Schedule 5	\$					
Automobiles	\$		\$					
	\$		\$					
Other coacte itemine	<u> </u>	Other liebilities itemine	\$ \$					
Other assets - itemize	<u> </u>	Other liabilities - itemize	\$					
	<del>-</del> \$		\$					
	\$		\$					
	\$		\$					
Total Assets	\$	Total Liabilities	\$					
Net Worth  Subtract your total liabilities from total assets and enter	figure to right							
Contingent Liabilities								
As guarantor or co-maker, legal claims on leases or contracts Income Information		Banking Relationships						
Alimony, child support or separate maintenance income need not do not wish to have it considered as a basis for repaying this obl								
		Name and address of bank	Cash					
Salary (Gross)	\$	Single (S) Joint (J) Trust (T)	Balance					
Bonus and commissions, dividends, interest	\$		\$					
Rental Income	\$		\$					
Other - itemize	\$		\$					
	\$	Total Cook (list in Access as as a)	\$					
Total Income	\$	Total Cash (list in Assets above)	\$					

I warrant that there is no judgment against me nor lien unsatisfied upon my property except as shown, nor prior suit pending against me in any court, that no assets are pledged in any manner not shown herein, and that this statement is true and complete and is offered for the purpose of obtaining credit. Dinerman Group, LLC is authorized to check my (our) credit and employment history, and to answer questions about its credit experience with me (us). With joint credit, all applicants must sign.

		(Seal)			(Seal)
Date	Signature		Date	Signature	

	Debts/Credit Lines	(Include home equity ar	nd any other ope	n-end revolving credit,	even if unuse	d)				
			Endorsement or		Cre	edit	Original	U	npaid	Monthly
Name and address of ba	nk	C	ollateral (describe)	)	lir	ie	amount	ba	alance	payment
					\$	\$		\$	\$	
					\$	\$		\$	\$	
					\$	\$		\$	\$	
					\$	\$ \$		\$	\$ \$	
				Total						
Name and address of o	others				\$	\$		\$	\$	
					\$	\$		\$	\$	
					\$	\$		\$	\$	
					\$	\$		\$	\$	
				Total	\$	\$		\$	\$	
Schedule 2	Accounts, Loans, ar	nd Notes Receiva	ble	Total	Ψ	Ψ		Ψ	Ψ	
Maturity	7 1000 0		Amount	Description or			Description of			Repayment
Name and address of de	ebtor	date	owing	nature of debt			security held			terms
		\$								
		-								
		\$								
		\$								
Total		\$								
Schedule 3	Life Insurance									
Face amount				Surrender	Loans		Yearly		ype of	Is policy assigned?
Name of insured	Beneficiary	Insurance Co.	of policy	value	pol	icy	premium	Р	olicy	assigned?
		\$		\$	\$	\$				
		\$		\$	\$	\$				
Total		\$		\$	\$	\$				
Schedule 4	Stocks, Bonds and I	US Government S	ecurities							
Description of	Registered	Face value (bonds)		Market	То	tal	Pledged	Listed (L) or	n NYSE, AMEX	
Security	in name of	No of shares (stocks)		value/share	marke	value	Yes/No	Unlisted (U) Gov	vernment Security (G)	
				\$	\$					
				\$	\$					
				\$	\$					
				\$	\$					
				Total Listed	\$					
				Total Unlisted	\$					
Schedule 5	Real Estate									
Description or a	address to Title in	Date		Market	Ta		Original		npaid	Monthly
Description or a include city a	address to Title in	Date acquired	Cost	value	val	ue	Original amount	ba	alance	Monthly payment
Description or a include city a	address to Title in		Cost	value \$						
Description or a	address to Title in		Cost	value	val	ue		ba	alance	
Description or a include city a \$	address to Title in		Cost	value \$	val	ue \$		\$	alance \$	
Description or a include city a	address to Title in		Cost	value \$	val	\$ \$		\$ \$	s \$	
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Description or a include city a \$ \$ \$ Total	address to Title in	acquired \$	ce companies or	value \$ \$ \$ \$ \$	val \$ \$ \$	\$ \$ \$ \$ punt	amount	\$ \$ \$	s \$ \$	payment
Description or a include city at \$ \$ \$ Total	address to Tille in and state name of	acquired \$ List names of banks, finar	ce companies or	value \$ \$ \$ \$ \$	val	\$ \$ \$ \$ punt		\$ \$ \$	s \$ \$	
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