



ARNEL COMMERCIAL PROPERTIES
Leasing Office (714) 481-5025
Fax (714) 481-5041
Email: rconlogue@arnel.com

GUARANTOR S PERSONAL INFORMATION

First Name: _____ Last Name: _____

Residence Address: _____
Street, City, County, State & ZIP

Phone #: _____ Date of Birth: _____

Driver's License: _____ Social Security #: _____

Spouse's Name: _____ Spouse's Social Security #: _____

Do you own your residence? Yes _____ No _____ How Long: _____ Years

Property Value: _____ Original Cost: _____

Lender/Landlord Name: _____ Lender/Landlord Phone #: _____

Has applicant been a party to an unlawful detainer action within the last five years? No Yes

If yes, explain _____

Has applicant filed bankruptcy within the last seven years? No Yes

If yes, explain _____

Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? No Yes

If yes, explain _____

BUSINESS INFORMATION

Full Legal Name: _____

Doing Business As: _____

Address: _____
Street, City, County, State & ZIP

Phone Number: _____ How Long in Business? _____ Years

Business Entity Type: Partnership? _____ Corporation? _____
Sole Proprietor? _____ Other? _____

Nature of Business: _____

Current Landlord: _____

Contact Name: _____ Phone Number: _____

BANK REFERENCES

Please list all business bank account(s):

Bank: _____
 Phone #: _____
 Account Holder: _____

Branch: _____
 Contact: _____
 Account #: _____

Please list all personal bank account(s):

Bank: _____
 Phone #: _____
 Account Holder: _____

Branch: _____
 Contact: _____
 Account #: _____

GUARANTOR S PERSONAL INFORMATION

ASSETS <small>Please Attach Supporting Documents</small>	
Checking / Savings	
IRA / 401K	
Stocks / Bonds	
Accounts Receivable	
Real Estate Owned	
1	
2	
3	
Vehicles (Describe)	
1	
2	
3	
Cash Surrender Value of Life Insurance	
Face Value of Life Insurance	
Other Assets	
1	
2	

TOTAL ASSETS (A) \$ -

ANNUAL INCOME	
Salary	
Bonus/Commission	
Rents/Investments	
Other Investments	
Other Income	
1	

TOTAL ANNUAL INCOME \$ -

LIABILITIES	
Revolving Debt (Credit Cards)	
Installment Loans (Auto/Personal)	
1st Mortgage on Residence	
Other Mortgage on Residence	
Mortgages on Other Real Estate	
Loans on Life Insurance	
Other Liabilities (Describe)	
1	
2	
3	

TOTAL LIABILITIES (B)	\$	-
NET WORTH (A - B)	\$	-

ANNUAL EXPENDITURES	
Real Estate Mortgages (P & I)	
Other Loans & Credit Cards	
Income, Insurance & Property Taxes	
Other Loans & Credit Cards	
Investments	
Other / Living	

TOTAL ANNUAL EXPENDITURES \$ -

I hereby warrant to Arnel Commercial Properties that this personal financial statement is complete and correct as of the date prepared and fairly represents my financial condition and that I will promptly inform Arnel Commercial Properties of any material changes in the information provided. All information provided will be kept confidential. I hereby authorize the holder of this Personal Lease Application to run my credit as often as is deemed necessary.

By: _____
APPLICANT'S SIGNATURE DATE

By: _____
CO-APPLICANT'S SIGNATURE DATE