



# LEASING APPLICATION

(EACH CO-APPLICANT MUST SUBMIT A SEPARATE APPLICATION UNLESS THE CO-APPLICANT IS A SPOUSE)

A.J. DWOSKIN & ASSOCIATES, INC.  
Real Estate Development & Management  
3201 Jermantown Road, Suite 700 Fairfax, VA 22030  
Tel 703-273-9320 / Fax 703-273-5045 • [www.dwoskin.com](http://www.dwoskin.com)

## LOCATION

Name of Center

Square Footage

Name of Leasing Agent

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## APPLICANT INFORMATION

First Name

M.I.

Last Name

Other Last Names Used

Social Security #

Date of Birth

Home #

Work #

Cell #

Best Time to Call

E-Mail Address

Fax #

## SPOUSE INFORMATION

First Name

M.I.

Last Name

Other Last Names Used

Social Security #

Date of Birth

## 5 YEAR RESIDENT HISTORY (MUST BE CONSECUTIVE)

Current Address

Street

Apt. #

City, State

Zip

Move-In Date

Previous Address

Street

Apt. #

City, State

Zip

Residency Dates

Previous Address

Street

Apt. #

City, State

Zip

Residency Dates

Previous Address

Street

Apt. #

City, State

Zip

Residency Dates

*If you have additional places of residency or own more than 1 home, please record the applicable information on the back of this application.*

            
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## PERTINENT INFORMATION

Do you and your spouse, if applicable, have a legal right to be in the United States?

- Yes, because I am a United States citizen.
- Yes, I have valid documentation from the Bureau of Citizenship & Immigration Services (BCIS), formerly the U.S. Immigration and Naturalization Service) or from the State Department.
- No

Have you ever applied or lived at an A.J. Dvoskin & Associates, Inc. community? \_\_\_\_\_  
 If yes, when? \_\_\_\_\_ and what property? \_\_\_\_\_

Do you own a home? \_\_\_\_\_ If yes, Who is/was your mortgage holder? \_\_\_\_\_ Contact # \_\_\_\_\_

Is the home paid in full? \_\_\_\_\_ If no, what is your approximate balance? \_\_\_\_\_

Have you or a related entity you own ever foreclosed on a home or are you currently in the process of having a home foreclosed? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you or a related entity you own ever been evicted or are you currently in the process of being evicted from any leased premises? \_\_\_\_\_

Have you or a related entity you own ever owed monies to a prior landlord? \_\_\_\_\_ If yes, when? \_\_\_\_\_  
 Is it paid in full? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you or a related entity you own ever owed monies to a major utility company? \_\_\_\_\_ If yes, when? \_\_\_\_\_  
 Is it paid in full? \_\_\_\_\_ When? \_\_\_\_\_

Have you or a related entity that you own ever filed bankruptcy? \_\_\_\_\_ If yes, when? \_\_\_\_\_ Please provide written proof of the discharge or dismissal upon request.

Have you ever been convicted of or plead guilty or "no contest" to a felony (whether or not resulting in a conviction)? \_\_\_\_\_

Have you ever been convicted of or plead guilty or "no contest" to a sexual misconduct misdemeanor (whether or not resulting in a conviction)? \_\_\_\_\_

*If yes was answered for any of the questions within this section, please provide written explanation on the back of this application.*

### EMERGENCY CONTACT / CLOSEST RELATIVE NOT LIVING WITH YOU

Name \_\_\_\_\_ Full Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_ Relationship to You \_\_\_\_\_ Phone # (+ area code) \_\_\_\_\_

### LEASING APPLICATION AUTHORIZATION DISCLOSURE

I (we) authorize A. J. Dvoskin & Associates, Inc. or their agents, to investigate my (our) qualifications and consumer reports, and/or any and all references given or discovered. I (we) realize this information will be used by A. J. Dvoskin & Associates, Inc. and/or their agents, to evaluate my (our) qualifications and credit standing which may include but not be limited to a criminal background check prior to their approval or disapproval of my (our) leasing application.

**BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL YOUR RESPONSES ARE TRUE AND COMPLETE AND AUTHORIZE OWNER TO VERIFY THIS INFORMATION. ANY FALSE STATEMENT ON THIS APPLICATION WILL LEAD TO REJECTION OF YOUR APPLICATION OR IMMEDIATE TERMINATION OF YOUR LEASE CONTRACT.**

X _____	_____	_____
Applicant's Signature	Printed Name	Date
X _____	_____	_____
Spouse Applicant's Signature	Printed Name	Date

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## PERSONAL FINANCIAL STATEMENT

(EACH CO-APPLICANT MUST SUBMIT A SEPARATE APPLICATION UNLESS THE CO-APPLICANT IS A SPOUSE)

### PERSONAL FINANCIAL STATEMENT

Please read the following directions before completing this Personal Financial Statement. Check the applicable box(es):

1.  Use of Individual Credit: Complete all sections, except Section 2, if you are applying for individual credit in your own name and are relying solely on your own income or assets for repayment or if this personal financial statement relates to your guaranty of the indebtedness of other person(s), firms(s), or corporation(s).

OR

2.  Use of Joint Credit: Complete all sections, including Section 2, if:

A.  you are applying for joint credit with another person. Please provide information about the joint applicant.

And/or

B.  you are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as basis for repayment of the credit requested. Please provide information about the person on whose alimony, support or maintenance payment or income or assets you are relying.

And/or

C.  this is a joint guaranty of the indebtedness of other person(s), firm(s) corporation(s). Please provide information about the joint guarantors.

3.  Please initial each page where indicated.

#### Section 1 INDIVIDUAL / APPLICANT INFORMATION

#### Section 2 SPOUSE INFORMATION

*Please print. Some duplicate information is needed as portions of the application are processed separately.*

Full Name \_\_\_\_\_

Full Name \_\_\_\_\_

Full Current Residence Address (Street, City, State, Zip Code)  
\_\_\_\_\_

Full Current Residence Address (Street, City, State, Zip Code)  
\_\_\_\_\_

Position or Occupation  
\_\_\_\_\_

Position or Occupation  
\_\_\_\_\_

Business Name / Years in Business  
\_\_\_\_\_

Business Name / Years in Business  
\_\_\_\_\_

Full Business Address  
\_\_\_\_\_

Full Business Address  
\_\_\_\_\_

Home Number / Business Number / Fax Number  
\_\_\_\_\_

Home Number / Business Number / Fax Number  
\_\_\_\_\_

List all other businesses owned or have current interest in:  
\_\_\_\_\_  
\_\_\_\_\_

List all other businesses owned or have current interest in:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
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# PAGE 2 – PERSONAL FINANCIAL STATEMENT

## STATEMENT OF FINANCIAL CONDITION

Statement of Financial Condition as of \_\_\_\_\_.

### SECTION 3 – BALANCE SHEET (attach additional schedules as needed)

<u>A S S E T S</u>	<u>Dollars</u>	<u>Jt*</u>	<u>L I A B I L I T I E S</u>	<u>Dollars</u>
Cash & Short-term investments (Schedule A)	\$ _____	<input type="checkbox"/>	Outstanding Credit Card Balances	\$ _____
Stocks & Bonds (readily marketable) (Schedule B)	\$ _____	<input type="checkbox"/>	Taxes Payable	\$ _____
Unlisted Securities (Schedule C)	\$ _____	<input type="checkbox"/>	Policy Loan (life insurance) (Schedule D)	\$ _____
Notes Receivable & Accounts Receivable	\$ _____	<input type="checkbox"/>	Mortgages/Obligations Due (Schedules F & G)	\$ _____
Cash Surrender Value-Life Insurance (Schedule D)	\$ _____	<input type="checkbox"/>	Notes & Accounts Payable (Schedule H)	\$ _____
General/Ltd Partnership Interests (Schedule E)	\$ _____	<input type="checkbox"/>	Other Liabilities (please list below):	
Retirement Accounts	\$ _____	<input type="checkbox"/>	_____	\$ _____
Personal Property	\$ _____	<input type="checkbox"/>	_____	\$ _____
Automobiles	\$ _____	<input type="checkbox"/>	_____	\$ _____
Real Estate—Personal Residences (Schedule F)	\$ _____	<input type="checkbox"/>	_____	\$ _____
Real Estate – Investments (Schedule G)	\$ _____	<input type="checkbox"/>	_____	\$ _____
Real Estate Investments (Direct & Partnership Interests)	\$ _____	<input type="checkbox"/>	_____	\$ _____
Other Assets (please list below):			_____	\$ _____
_____	\$ _____	<input type="checkbox"/>	_____	\$ _____
_____	\$ _____	<input type="checkbox"/>	_____	\$ _____
_____	\$ _____	<input type="checkbox"/>	_____	\$ _____
_____	\$ _____	<input type="checkbox"/>	_____	\$ _____
<b>TOTAL ASSETS</b>	<b>\$ _____</b>		<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>
			<b>NET WORTH (total assets minus total liabilities)</b>	<b>\$ _____</b>

### SECTION 4 – INCOME STATEMENT

<u>A N N U A L I N C O M E</u>	<u>Applicant</u>	<u>Spouse</u>	<u>A N N U A L E X P E N S E S</u>	<u>Applicant</u>	<u>Spouse</u>
Salary	\$ _____	\$ _____	Home Mortgage (Principal & Interest)	\$ _____	\$ _____
Bonus & Commissions	\$ _____	\$ _____	Loan Payments (including other R/E)	\$ _____	\$ _____
Interest & Dividends	\$ _____	\$ _____	Income Tax (State & Federal)	\$ _____	\$ _____
Alimony, Separate Maintenance, Child	\$ _____	\$ _____	Planned or Required Investments/ Partnership Contributions	\$ _____	\$ _____
Capital Gains	\$ _____	\$ _____	General Living Expenses	\$ _____	\$ _____
Real Estate Income	\$ _____	\$ _____	Other Expenses (please list below):		
Other Income (please list below):			_____	\$ _____	\$ _____
_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	\$ _____	_____	\$ _____	\$ _____
<b>GROSS INCOME</b>	<b>\$ _____</b>		<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>	<b>\$ _____</b>

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# PAGE 3 – PERSONAL FINANCIAL STATEMENT

## SECTION 5 – CONTINGENT LIABILITIES (include brief description)

	<u>Applicant</u>	<u>Spouse</u>
As endorser or guarantor on notes/leases/contracts: _____	\$ _____	\$ _____
On letters of credit: _____	\$ _____	\$ _____
Current or pending suits or other litigation: _____	\$ _____	\$ _____
Other (Partnership, etc.) explain: _____	\$ _____	\$ _____
	\$ _____	\$ _____

## SCHEDULE A: CASH & SHORT-TERM INVESTMENTS (certificates of deposit, commercial paper, money market funds, etc.)

<u>Name of Institution</u>	<u>Savings Accounts</u> <small>(\$ Amounts)</small>	<u>Checking</u> <small>(\$ Amounts)</small>	<u>Other Short-term Investments</u> <small>(type and amount)</small>	<u>Total</u>	<u>Pledged?</u> <small>(Y)/(N)</small>	<u>Owner Code</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

## SCHEDULE B: STOCKS & BONDS (include U.S. Government and marketable securities)

<u>Number of Shares or Face Value (Bonds)</u>	<u>Description</u>	<u>Market Value</u>	<u>Margin?</u> <small>(Y)/(N)</small>	<u>Restricted?</u> <small>(Y)/(N)</small>	<u>Pledged?</u> <small>(Y)/(N)</small>	<u>Owner Code</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

## SCHEDULE C: UNLISTED SECURITIES

<u>Number of Shares</u>	<u>Description</u>	<u>Source of Value</u>	<u>Value</u>	<u>% of Co. Owned</u>	<u>Pledged?</u> <small>(Y)/(N)</small>	<u>Owner Code</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

## SCHEDULE D: LIFE INSURANCE CARRIED (include individual and group insurance)

<u>Insurance Company Name</u>	<u>Owner of Policy</u>	<u>Beneficiary</u>	<u>Face Value</u>	<u>Policy Loans</u>	<u>Cash Surrender Value</u>	<u>Assigned?</u> <small>(Y)/(N)</small>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

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# PAGE 4 – PERSONAL FINANCIAL STATEMENT

## SCHEDULE E: GENERAL AND/OR LIMITED PARTNERSHIP INTERESTS (please attach K-1)

<u>Name of Partnership</u>	<u>Type of Investment</u>	<u>(L)imited (G)eneral</u>	<u>Amount Invested</u>	<u>Fair Market Value of Interest</u>	<u>Annual Contribution Required</u>	<u>Pledged (Y)/(N)</u>	<u>Owner Code</u>

## SCHEDULE F: REAL ESTATE (personal residences)

<u>Description / Address Of Property</u>	<u>Mortgage Holder</u>	<u>Maturity Date</u>	<u>Title in Name Of</u>	<u>Purchase Date</u>	<u>Cost</u>	<u>Present Loan Balance</u>	<u>Monthly Payment</u>	<u>Market Value</u>

## SCHEDULE G: REAL ESTATE INVESTMENTS

<u>Description / Address Of Property</u>	<u>Mortgage Holder</u>	<u>Maturity Date</u>	<u>% Owned</u>	<u>Title in Name Of</u>	<u>Purchase Date</u>	<u>Cost</u>	<u>Present Loan Balance</u>	<u>Market Value</u>	<u>Total Annual Rental Income</u>	<u>Monthly Loan Payment</u>

## SCHEDULE H: NOTES & ACCOUNTS PAYABLE (also include credit lines & other commitments even if unused)

<u>Name of Creditor</u>	<u>Original Amount of Loan</u>	<u>Payment / Repayment Terms</u>	<u>Maturity Date</u>	<u>Interest Rate</u>	<u>Description of Collateral (if any)</u>	<u>Balance Owning</u>

\_\_\_\_\_  
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# PAGE 5 – PERSONAL FINANCIAL STATEMENT

## PERSONAL INFORMATION

**Do you have a will?**

Yes  No If yes, name of executor: \_\_\_\_\_ Number of Dependents: \_\_\_\_ Ages: \_\_\_\_\_

**Are you a partner or officer in any venture other than described on schedules?**

Yes  No If yes, describe: \_\_\_\_\_

**Are any assets pledged other than described on schedules?**

Yes  No If yes, describe: \_\_\_\_\_

**Have you ever been declared bankrupt?**

Yes  No If yes, describe: \_\_\_\_\_

**Are there any outstanding judgments against you?**

Yes  No

**Do you have disability insurance?**

Yes  No

**Income tax settled through (date):** \_\_\_\_\_

**Alimony, Child Support / Maintenance Expense?** \_\_\_\_\_

## PERSONAL FINANCIAL STATEMENT AUTHORIZATION DISCLOSURE

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with the Landlord on behalf of the undersigned or person(s), firm(s) or corporation(s), in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in the Landlord's favor. Each undersigned understands that the Landlord is relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information is true and complete and that the Landlord may consider this statement as continuing to be true and correct until a written notice of change is given to the Landlord, by the undersigned. The landlord and/or their agents are authorized to make all inquires deemed necessary which will not be limited to the running of consumer reports, business reports, and/or any and all references given or discovered to verify the accuracy of the statements made herein to determine the credit worthiness of the undersigned prior to the approval of the disapproval of this leasing application. Any false statement on the application will lead to rejection or your application or termination of your lease contract. Also, the Landlord is authorized to answer questions about any questions about your credit experience with the undersigned. **I further understand that I will be required to submit an original letter from my bank(s) showing the average monthly balance. This letter must be signed by a bank officer.**

\_\_\_\_\_  
Signature (Individual)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Spouse)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date

# A.J. DWOSKIN

## & ASSOCIATES INC

Real Estate Development And Management

Please complete and **FORWARD TO YOUR BANK** for account verification.

Name and address of bank or other lending institution:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please verify the following account information for: \_\_\_\_\_  
(Print Name or Account Name)

\_\_\_\_\_

(Notice Address)

\_\_\_\_\_

(City, State, Zip Code)

CUSTOMER AUTHORIZATION: \_\_\_\_\_  
(Signature) (Date)

SOCIAL SECURITY/FEDERAL ID: \_\_\_\_\_

**(For Bank Use Only)**

Type of Acct.	Acct. Number	High Credit	Date <u>Opened</u>	Current <u>Balance</u>	Avg. Daily <u>Balance</u>	Satisfactory/ <u>Unsatisfactory</u>
_____	# _____	_____	___/___/___	\$ _____	\$ _____	_____
_____	# _____	_____	___/___/___	\$ _____	\$ _____	_____

**(For Bank Use Only)**

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Lender)

BY: \_\_\_\_\_

(Signature)

TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_



## **BUSINESS PLAN REQUIREMENTS**

Furnished by:  
A.J. Dwoskin & Associates, Inc.  
3201 Jermantown Rd., Suite 700  
Fairfax, VA 22030

The following is a list of **requirements** to be included in your Business plan. The Business Plan is an effective tool for defining, organizing and managing a business's goals and objectives. This plan must contain all the points listed below and be submitted along with your application.

### **I. Executive Summary**

A short, concise summary of the business purpose that will include the essentials of the Business Plan:

- A. Who owns and runs the business?
- B. What is/are the product(s)/service(s)?
- C. Where is the business located?
- D. Why should the business exist?
- E. When did it or will it start?
- F. Who is the customer?
- G. Expected investment in furniture, fixtures, inventory amount

### **II. Pictures of Existing Location**

Include pictures of any existing locations/franchises or pictures of similar locations on which you would like to base your design and layout.

### **III. Space Plan and Color Board**

- A. A **professionally drawn** space plan of your proposed location should be included
- B. A color board showing furniture, color scheme and finishes. See attached example

### **IV. Financial Statement Requirements**

- A. Personal Financial statements of owners and guarantors of the Business
- B. Bank Verifications (forms to be filled out by bank personnel)

**C. Source of Funds**

1. Savings, Checking, HELOC, family loan, etc.
2. Provide explanation for any large deposits

**D. Financial Statements of existing business (3 years, if applicable)**

**E. Tax returns (2 years)**

**V. Cost Estimate**

A detailed cost estimate that gives an idea about the specific costs of build out, i.e. Kitchen equipment, plumbing, electrical, architectural fees, signage etc. This estimate must be well thought out and supported in part by estimates or receipts from actual service providers or vendors.

**VI. First Year Projections**

You may use your own or the sheet provided to you in your application package.

## SAMPLE COST DEVELOPMENT ESTIMATE

**THIS IS ONLY A SAMPLE. YOUR ACTUAL COST ESTIMATE SHOULD IN NO WAY BE LIMITED TO THESE CATEGORIES. EQUIPMENT AND CONSTRUCTION COSTS SHOULD BE DETAILED AND SUPPORTED BY ESTIMATES FROM SERVICE PROVIDERS AND VENDORS**

### **STORE ABC**

<b>Build-Out Costs</b>	<b>Low</b>	<b>to</b>	<b>High</b>
Construction	\$	to	\$
Architectural Fees	\$	to	\$
Permits and Licenses	\$	to	\$
<b>Signage and Graphics</b>	\$	to	\$
<b>Equipment and Supplies</b>			
Large Equipment	\$	to	\$
Smallwares	\$	to	\$
<b>Other Start-Up Costs</b>			
Training	\$	to	\$
Security Deposit	\$	to	\$
Business Insurance	\$	to	\$
Additional Operating Funds	\$	to	\$

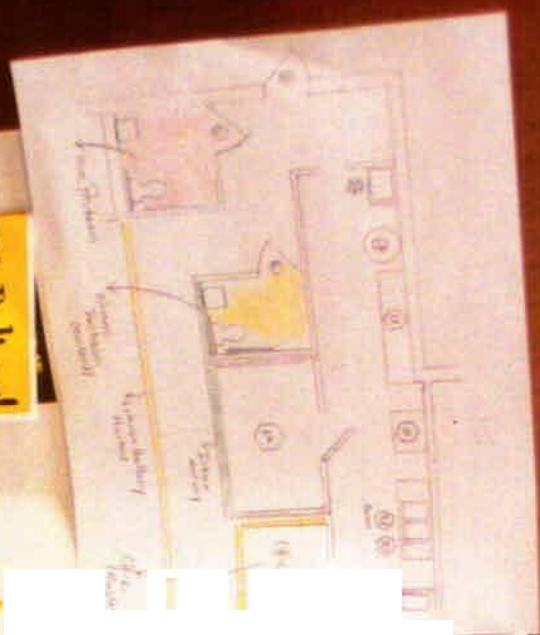
(Insert Name of Business Above)

**FIRST YEAR PROJECTIONS**

	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	TOTAL
<b>Gross Sales</b>													
<b>Expenses</b>													
Rent													
Loans													
Payroll													
Owner													
Employees													
Utilities													
Gas/Electric													
Telephone													
HVAC Contract													
Real Estate Taxes													
CAM Charges													
Maintenance													
Accounting/Legal													
Advertising Budget													
Equipment Lease													
Other													
<b>Total Expenses</b>													
<b>Net Income</b>													

Sample of

# Color Board



Mustard (Mustard color)  
 Olive (Olive color)  
 Red Peppers (Red color)  
 Tile Floor



All Burgers to be placed in brown bag with Burger Joe's logo



Employee Uniforms and Merchandise