



BURGESS MANAGEMENT GROUP
COMMERICAL RENTAL APPLICATION



PO BOX 14917 ~ GREENSBORO ~ NC ~ 27415
1828 BANKING STREET ~ GREENSBORO, NC
PHONE (336) 379-7368 ~ FAX (336) 379-7314 pete@bmgrents.com

PLEASE ANSWER ALL QUESTIONS

Date of Application \_\_\_\_\_ Property Address or Name of Shopping Center \_\_\_\_\_

Applicant's Full Name \_\_\_\_\_ Social Security # (TIN) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #/State: \_\_\_\_\_

Telephone #: (mobile) \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

e-mail Address \_\_\_\_\_ Check one: \_\_Married \_\_Divorced \_\_Separated \_\_Single

Present Address \_\_\_\_\_

Check one: \_\_Own home \_\_Rent \_\_Other Monthly Rent/Mortgage Amount \$ \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Current Lease Expiration: \_\_\_\_\_

Name of Landlord, Management Company or Mortgage Company: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Employed By: \_\_\_\_\_ Position/Title: \_\_\_\_\_

How long on job: \_\_\_\_\_ Income: \$ \_\_\_\_\_ Hourly/ Monthly/ Yearly

Supervisors Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

ALL Others who will assist in operations :

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

ASSETS:

LIABILITIES:

CASH: \$ \_\_\_\_\_

NOTES PAYABLE: \$ \_\_\_\_\_

REAL ESTATE: \$ \_\_\_\_\_

CONSUMER LOANS: \$ \_\_\_\_\_

NOTES RECEIVABLE: \$ \_\_\_\_\_

AUTO LOANS: \$ \_\_\_\_\_

STOCKS & BONDS: \$ \_\_\_\_\_

REAL ESTATE MORTGAGE: \$ \_\_\_\_\_

AUTOMOBILES: \$ \_\_\_\_\_

TOTAL LIABILITIES (B): \$ \_\_\_\_\_

OTHER: \$ \_\_\_\_\_

TOTAL ASSETS (A): \$ \_\_\_\_\_

NET WORTH (A-B): \$ \_\_\_\_\_

**BANK REFERENCES:**

| NAME OF BANK | CONTACT | TELEPHONE | ACCT TYPE | BALANCE  |
|--------------|---------|-----------|-----------|----------|
| _____        | _____   | _____     | _____     | \$ _____ |
| _____        | _____   | _____     | _____     | \$ _____ |

**EMPLOYMENT:**

| COMPANY | SUPERVISOR | LENGTH OF EMPLOYMENT | ANNUAL SALARY |
|---------|------------|----------------------|---------------|
| _____   | _____      | _____                | \$ _____      |
| _____   | _____      | _____                | \$ _____      |

MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_\_\_

**EMPLOYMENT:**

| COMPANY | SUPERVISOR | LENGTH OF EMPLOYMENT | ANNUAL SALARY |
|---------|------------|----------------------|---------------|
| _____   | _____      | _____                | \$ _____      |
| _____   | _____      | _____                | \$ _____      |

**OTHER INCOME:**

|                             |          |
|-----------------------------|----------|
| _____                       | \$ _____ |
| <b>TOTAL ANNUAL INCOME:</b> | \$ _____ |

**REAL ESTATE OWNED:**

| SOLE/JOINT<br>OWNER | DATE<br>ACQUIRED | LOCATION | TYPE  | MARKET<br>VALUE | MORTGAGE | ANNUAL<br>PITI | ANNUAL<br>RENT |
|---------------------|------------------|----------|-------|-----------------|----------|----------------|----------------|
| _____               | _____            | _____    | _____ | \$ _____        | \$ _____ | \$ _____       | \$ _____       |
| _____               | _____            | _____    | _____ | \$ _____        | \$ _____ | \$ _____       | \$ _____       |
| _____               | _____            | _____    | _____ | \$ _____        | \$ _____ | \$ _____       | \$ _____       |
| <b>TOTALS</b>       |                  |          |       | \$ _____        | \$ _____ | \$ _____       | \$ _____       |

IF REAL ESTATE IS JOINTLY OWNED, LIST OTHER PERSON OR ENTITY:

\_\_\_\_\_  
\_\_\_\_\_

ARE YOU PARTY TO ANY PENDING LAWSUITS?: \_\_\_\_\_

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

HAVE YOU EVER BEEN A PARTY TO A COMMERCIAL LEASE?: \_\_\_\_\_

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

HAVE YOU OR ANY FIRM YOU OWNED EVER DECLARED BANKRUPTCY: \_\_\_\_\_

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

**BUSINESS EXPERIENCE - RETAIL:**

**INDICATE DATES:** \_\_\_\_\_

**DESCRIBE FULLY THE BUSINESS OPERATIONS AND YOUR ROLES:** \_\_\_\_\_

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**OTHER WORK EXPERIENCE:**

**INDICATE DATES:** \_\_\_\_\_

**DESCRIBE FULLY THE BUSINESS OPERATIONS AND YOUR ROLES:** \_\_\_\_\_

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**IF YOU HAVE ANY OTHER BUSINESSES, PLEASE PROVIDE PERTINENT OPERATING STATEMENTS FOR THE LAST 24 Mos. WHERE POSSIBLE. WILL YOU HAVE A CONTINUING ROLL IN THE ABOVE BUSINESSES? IF SO, WHAT WILL IT BE?**

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**HOW WILL YOU OPERATE YOUR NEW BUSINESS AT OUR PROPERTY? WHO WILL MANAGE YOUR BUSINESS? HOW MANY EMPLOYEES WILL YOU NEED?**

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**IF YOUR BUSINESS IS A PARTNERSHIP OR A JOINT VENTURE, DESCRIBE ITS LEGAL AND FINANCIAL STRUCTURE AND SUBMIT COPIES OF ALL APPROPRIATE LEGAL DOCUMENTS:**

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**IF YOUR BUSINESS INVOLVES A FRANCHISE, SUPPLY A COPY OF THE AGREEMENT, INFORMATION ON HOW THE PURCHASE IS BEING FINANCED AND FINANCIAL AND BUSINESS REPORT ON THE FRANCHISOR.**

**WHAT IMPROVEMENTS DO YOU PLAN TO MAKE TO THE PREMISES (FIXTURES, CARPET, ETC.) AND AT WHAT COST? HOW WILL IMPROVEMENTS BE FINANCED ?**

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**DESCRIBE YOUR ANTICIPATED START-UP OPERATING EXPENSES AT THE NEW LOCATION AND LIST AMOUNTS.  
(INCLUDE INVENTORY, SUPPLIES, INITIAL PAYROLL COSTS, INSURANCE, ETC.)**

|       |          |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

**HOW WILL YOU FINANCE YOUR START-UP EXPENSES?**

\_\_\_\_\_

\_\_\_\_\_

**ANALYSIS OF PROJECTED INCOME FROM OPERATIONS AT EH NEW LOCATION FOR THE FIRST TWO YEARS (COMPLETE WHERE APPLICABLE):**

| <u>REVENUES</u>                                 | <u>YEAR 1</u> | <u>YEAR 2</u> |
|---|---------------|---------------|
| GROSS SALES                                     | \$ _____      | \$ _____      |
| COST OF GOODS SOLD                              | \$ _____      | \$ _____      |
| GROSS MARGIN                                    | \$ _____      | \$ _____      |
| OTHER REVENUES (SPECIFY)                        | \$ _____      | \$ _____      |
| <b>TOTAL REVENUES:</b>                          | \$ _____      | \$ _____      |
| <br>  |               |               |
| <u>EXPENSES</u>                                 |               |               |
| SALARIES & WAGES                                | \$ _____      | \$ _____      |
| PAYROLL TAXES                                   | \$ _____      | \$ _____      |
| COMPENSATION INSURANCE                          | \$ _____      | \$ _____      |
| UTILITIES (PG&E, WATER, TELEPHONE)              | \$ _____      | \$ _____      |
| REPAIRS & MAINTENANCE                           | \$ _____      | \$ _____      |
| JANITORIAL SERVICES, LAUNDRY                    | \$ _____      | \$ _____      |
| SUPPLIES  | \$ _____      | \$ _____      |
| ADVERTISING & PROMOTIONS                        | \$ _____      | \$ _____      |
| RENT & RELATED COSTS                            | \$ _____      | \$ _____      |
| INSURANCE (FIRE, LIABILITY, PLATE GLASS)        | \$ _____      | \$ _____      |
| MANAGEMENT FEE                                  | \$ _____      | \$ _____      |
| REAL ESTATE TAXES                               | \$ _____      | \$ _____      |
| PERSONAL PROPERTY TAXES                         | \$ _____      | \$ _____      |
| FINANCIAL EXPENSES (INCLUDE PRINCIPAL PAYMENTS) | \$ _____      | \$ _____      |
| OTHER   | \$ _____      | \$ _____      |
| <b>TOTAL EXPENSES:</b>                          | \$ _____      | \$ _____      |
| <br>  |               |               |
| NET OPERATING INCOME (CASH)                     | \$ _____      | \$ _____      |

**IF YOU PROJECT A LOSS IN NET OPERATING INCOME, EXPLAIN HOW IT WILL BE FINANCED.**

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**REFERENCES:**

**LANDLORDS (BUSINESS):**

**TELEPHONE**

**NAME/ADDRESS**

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**SUPPLIES:**

**ACCOUNT NO.**

**TELEPHONE**

**NAME/ADDRESS**

|       |       |       |
|-------|-------|-------|
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*By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. Applicant understands that approval process will include a review of credit history and criminal background check. Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for properties managed by Burgess Management Group.*

\_\_\_\_\_  
Applicant Signature                      Date

\_\_\_\_\_  
Applicant Signature                      Date