

ARNEL COMMERCIAL PROPERTIES
Leasing Office: (714) 481-5025

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 <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, explain _____			
Has applicant filed bankruptcy within the last seven years?		No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, explain _____			
Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony?		No <input type="checkbox"/>	Yes <input type="checkbox"/>
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? _____ Sole Proprietor? _____	Corporation? _____ 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

Please Attach Supporting Documents

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)	\$
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ANNUAL INCOME

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

TOTAL ANNUAL INCOME	\$
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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	\$
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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