

(D) PERSONAL GUARANTOR

Personal Guarantor: _____ Phone Number: _____

Address: _____

Street City State Zip

Social Security #: _____ DOB: _____ Driver's License #: _____

Current Business Name: _____ Phone #: _____

Current Business Address: _____

Street City State Zip

Corporate Officers:

1. President: _____ % of Ownership _____

Residence Address: _____

Street City State Zip

Residence Phone Number: _____ Cellular Number: _____

Social Security #: _____ DOB: _____ Driver's License #: _____

2. Vice President: _____ % of Ownership _____

Residence Address: _____

Street City State Zip

Residence Phone Number: _____ Cellular Number: _____

Social Security #: _____ DOB: _____ Driver's License #: _____

3. Secretary: _____ % of Ownership _____

Residence Address: _____

Street City State Zip

Residence Phone Number: _____ Cellular Number: _____

Social Security #: _____ DOB: _____ Driver's License #: _____

4. Treasurer: _____ % of Ownership _____

Residence Address: _____

Street City State Zip

Residence Phone Number: _____ Cellular Number: _____

Social Security #: _____ DOB: _____ Driver's License #: _____

(E) FINANCIAL

1. Bank: _____ Phone #: _____

Address: _____

Street City State Zip

Type of Account: _____ Account #: _____

Contact: _____ Phone #: _____

The Applicant represents that all statements given herein are true and correct, and acknowledges Landlord's decision to lease to Tenant is materially affected by the accuracy of this information. The applicant hereby authorizes any verification, including the obtainment of a credit report, confirmation of bank accounts and discussions with references. Applicant further understands and requests that all information given herein will remain confidential.

Landlord reserves the right to have applicant periodically update this information. Applicant acknowledges that a \$30.00 service fee for individual or \$95.00 for corporation will be charged in conjunction with this application. This fee covers the costs of review and evaluation of the proposed tenant's creditworthiness.

Please have all guarantors, partners, and/or owners sign below.

Applicant Signature: _____ Date: _____
Print Name _____ Title: _____

Applicant Signature: _____ Date: _____
Print Name _____ Title: _____

Applicant Signature: _____ Date: _____
Print Name _____ Title: _____

Applicant Signature: _____ Date: _____
Print Name _____ Title: _____

Complete in full and submit along with financial statement to:

Sharp Commercial, Inc.
43645 Monterey Avenue Suite B
Palm Desert, CA 92260
760.773.3050
760.773.5890 fax