

RENT ASSESSMENT APPLICATION

COMPLETELY FILLING OUT THIS PACKAGE AND PROVIDING ALL REQUESTED INFORMATION WILL ENSURE A SPEEDY REVIEW OF YOUR REQUEST

Dear Tenant.

Business Name:

We are sorry we are going through this difficult time. We understand you have requested rent assistance. Please complete the below information in order for us to consider your application. We will review your application as soon as possible and get you a response. Please understand that while we want to help everyone, we also have financial responsibilities that we will most likely not get any relief from.

Name	e of person completing package:
Mobi	ile #:
Emai	il address:
IMP(ORTANT- PLEASE NOTE:
1.	. WHEN APPLYING FOR RENT RELIEF, TENANT MUST NOT BE IN DEFAULT.
2.	. ALL AGREEMENTS MUST BE IN WRITING SIGNED BY BOTH PARTIES AS AN AMENDMENT TO THE LEASE.
1. covei	Do you have business interruption insurance in place? (most leases require this rage)
2.	If you do, have you spoken to your agent about your coverage?
3.	Have you closed your business?
4.	If yes, date you closed:
5. descr	If you have closed or reduced your hours, was it due to government order? Please ribe:
6.	If you are still open, have your sales decreased? By how much (%)?

		e you applied for other assistance? Which one(s)? i.e. SBA, Facebook Grant ee below), etc
The SBA provides low-interest disaster loans to help businesses recover from declared disasters. For more information on Disaster Assistance, visit https://disasterloan.sba.gov/ela . If you have questions about the application or problems providing the required information, please contact the SBA Office of Disaster, Customer Service Center at 1-800-659-2955 or (TTY: 1-800-877-8339) DisasterCustomerService@sba.gov . 8. What specific assistance are you requesting?	https://www	v.sba.gov/page/coronavirus-covid-19-small-business-guidance-loan-resources
For more information on Disaster Assistance, visit https://disasterloan.sba.gov/ela . If you have questions about the application or problems providing the required information, please contact the SBA Office of Disaster, Customer Service Center at 1-800-659-2955 or (TTY: 1-800-877-8339) DisasterCustomerService@sba.gov . 8. What specific assistance are you requesting? 9. What will you do with this assistance?	https://www	v.facebook.com/business/boost/grants
9. What will you do with this assistance?	For more in questions at the SBA Of 8339) Disas	formation on Disaster Assistance, visit https://disasterloan.sba.gov/ela . If you have bout the application or problems providing the required information, please contact fice of Disaster, Customer Service Center at 1-800-659-2955 or (TTY: 1-800-877-sterCustomerService@sba.gov.
	8. Wha	at specific assistance are you requesting?
10. What are the plans for your business?	9. Wha	at will you do with this assistance?
10. What are the plans for your business?		
	10. Wha	at are the plans for your business?

In addition to the above information, please include:

- Monthly sales for last 12 months and 4 weeks leading up to your request. Business financial statements (Prior year and YTD)
 Personal financial statements (following page)
 3 months bank statements for business 1.
- 2.
- 3.
- 4.

PERSONAL FINANCIAL STATEMENT

As of the	day of 20		
For the purpose of requesting a (We) an true and correct statement of my	rental reduction at furnish (our) financial condition on date named	, I the following as a above, and agree	
	nges affecting my (our) financial condition		
Cash: Checking	Credit Card Debt		
Savings/Other	Other		
Stocks and Bonds	Federal & State Income Taxes Payable		
Accounts and Notes Receivable	Other Accrued Taxes & Interest		
Real Estate Owned	Loans: Mortgages		
Automobiles	Automobiles		
Business	Other		
Total Assets	Total Liabilities		
	Net Worth		
	TOTAL		
disclosure of this information is requive proposed transaction. The complete processing agency and is not to be to the undersigned hereby certify (cer	ion you have furnished will be preserved exc uired by applicable law or for the purposes e form is to be transmitted directly to the len transmitted through the applicant or any oth	of evaluating this ader or local aer party."	
relied upon for the purpose of exten			
Signature	Signature		
Print name:	Print name:	Print name:	