

**Bluestar Properties**  
**CONFIDENTIAL LEASE CREDIT APPLICATION**

**PERSONAL INFORMATION**

Interested In: \_\_\_\_\_ Tentative Move In Date: \_\_\_\_\_  
Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
How Long: \_\_\_\_\_ Do you Rent or Own: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Previous Address (if less than 2 years) \_\_\_\_\_  
How Long: \_\_\_\_\_ Do you Rent or Own: \_\_\_\_\_  
Driver's License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Home Tel. No.: ( ) \_\_\_\_\_  
Fax No.: ( ) \_\_\_\_\_ Cell No.: \_\_\_\_\_ Work Tel. No.: ( ) \_\_\_\_\_

**INCOME INFORMATION**

Employer's Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Position: \_\_\_\_\_ How Long: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Personal Monthly Income: \_\_\_\_\_ Combined Monthly Income: \_\_\_\_\_

**BUSINESS INFORMATION**

Proposed Use: \_\_\_\_\_

Full Legal Company Name: \_\_\_\_\_ Fax No.: ( ) \_\_\_\_\_  
dba: \_\_\_\_\_ Telephone No.: ( ) \_\_\_\_\_  
Have you ever owned your own Business: Yes  No  If Yes please fill in the following information  
Current Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Type of Ownership: Corporation:  Partnership:  LLC:  LLP:  Individual(s):   
State of Corporation/Partnership: \_\_\_\_\_ Date of Incorporation:/Partnership: \_\_\_\_\_  
Years in Business: \_\_\_\_\_ Person to Contact: \_\_\_\_\_  
Nature of Business: \_\_\_\_\_  
Business License No.: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Current landlord: Telephone: ( ) \_\_\_\_\_ Landlord's Name: \_\_\_\_\_  
Previous landlord: Telephone: ( ) \_\_\_\_\_ Landlord's Name: \_\_\_\_\_

**Have you ever filed bankruptcy?**

Personal: Yes  No  Date: \_\_\_\_\_ Discharged? Yes:  No   
Business: Yes  No  Date: \_\_\_\_\_ Discharged? Yes:  No   
1<sup>st</sup> Trust Deed holder: \_\_\_\_\_ Business: \_\_\_\_\_ Or Residence: \_\_\_\_\_  
Lenders Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Loan Balance: \$ \_\_\_\_\_ Value: \$ \_\_\_\_\_ Account No: \_\_\_\_\_  
2<sup>nd</sup> Trust Deed holder: \_\_\_\_\_ Business: \_\_\_\_\_ Or Residence: \_\_\_\_\_  
Lenders Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Loan Balance: \$ \_\_\_\_\_ Value: \$ \_\_\_\_\_ Account No: \_\_\_\_\_

**PLEASE LIST ALL BANK(S) (BUSINESS AND PERSONAL)**

Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Account Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Personal: \_\_\_\_\_ Business: \_\_\_\_\_  
Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Account Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Personal:  Business:   
Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Account Name: \_\_\_\_\_ Account No.: \_\_\_\_\_ Personal:  Business:

**TRADE REFERENCES, BUSINESS (IF NONE, PERSONAL)**

Name of Account: \_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Acct. No.: \_\_\_\_\_ Personal:  Business:   
Name of Account: \_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Acct. No.: \_\_\_\_\_ Personal:  Business:   
Insurance Agency: \_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Agent: \_\_\_\_\_  
Comments: \_\_\_\_\_ Personal:  Business:  Auto:   
Type of Use: \_\_\_\_\_

I hereby authorize any person or company to supply any information requested concerning the above mentioned company or myself; and authorize Bluestar Properties to request a TRW, Experian, Equifax, Trans Union and Dunn & Bradstreet or equivalent credit report.

***Along with this credit application please submit the following documents***

- Copy of Driver's License
- Copy of Business License
- Copy of Social Security Card
- Copy of Insurance Policy

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
By: \_\_\_\_\_  
(Please Type or Print)

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
By: \_\_\_\_\_  
(Please Type or Print)

**Please return to: P.O. Box 2319, Victorville, CA 92393  
12176 Industrial Blvd. #1, Victorville, CA 92392  
Telephone No.: (760) 241-5995  
Fax No.: (760)241-4349**

## **COMMERCIAL LEASE APPLICATION**

**BLUESTAR PROPERTIES**

**PO Box 2319**

**12176 Industrial Blvd., #1**

**Victorville, CA 92392**

**When you bring in your credit application, please bring with you the following items for each applicant:**

- Driver's License**
- Social Security Card**
- Business License**
- Six Mo. Existing Business Financial Statements *or***
- One Year Min. of Personal Financial Statements**
- Last 2 Years' Tax Returns**
- Previous Landlord's Name and Phone Number**
- Three References - Names, Addresses, and Phone Numbers**

**Please be patient. It will take time to completely check and verify the information presented to us. We appreciate your cooperation and understanding of this matter.**

**Our offices hours are 9:00 am to 6:00pm, Monday thru Friday, and 10:00am to 4:00pm on Saturdays. We are closed from 1:00pm to 2:00pm for lunch. If you have any questions please feel free to call our office at (760) 241-5995 ext 23 during these times. Thank you.**