H Mart Tenant Application

Please fill out this form, save and send it back to email <u>me@hmart.com</u> then we will contact you shortly.

Applicant Information

Applicant's Name 성명	First Name 이름	Las 성	st Name	Sex 성별	Male 남 □ Female 여 □
Social Security No. 사회보장번호		Driver License No.운전면허번:	Di	DOB 생년월일	Mon Day Yr
Applicant home Address 자택주소	Street		City	State	Zip
Home Phone# 자택전화		Cell phone# 핸드폰		E-mail 이메일	
Business Phone# 직장전화		Fax# 팩스		Web 웹사이트	
Co-Applicant's Name 성명	First Name 이름	Las 성	it Name	Sex 성별	Male 남 □ Female 여 □
					Male 남 □ Female 여 □ Mon Day Yr
Name 성명 Social Security No.		성 Driver License		성별 DOB	
Name 성명 Social Security No. 사회보장번호 Applicant home	이름	성 Driver License	<u> </u>	성별 DOB 생년월일	Mon Day Yr

Business/Personal Credit References

1.Business Name 사업체명		Phone# 전화		Fax# 팩스	
Business Address 사업체주소	Street		City S	tate	Zip
2.Business Name 사업체명		Phone# 전화		Fax# 팩스	
Business Address 사업체주소	Street		City S	tate	Zip
3.Business Name 사업체명		Phone# 전화		Fax# 팩스	
Business Address 사업체주소	Street		City S	tate	Zip
4.Business Name 사업체명		Phone# 전화		Fax# 팩스	
Business Address 사업체주소	Street		City S	ate	Zip

Personal Guarantors (if necessary)

Name 성명		Social Security# 사회보장번호		Phone# 전화	
Address 주소	Street	City	State	Zip	

Business / Employer Information

Business Name 사업체명		Business Type 업종		Year Business Incorporated	
Federal Tax ID# 납세번호		State of Incorpora 법인등록주	ation	List any co-bu or Partner 동안	
Business Address 사업체주소	Street	Cit	ty Star	te	Zip
Name of Landlord 건물주성명		Business Phone# 전화		Fax# 팩스	
Landlord Address 건물주주소	Street	Cit	ty Star	te	Zip
Business Name (Previous) 전사업체	려	Business Type 업종		Business Year 사업년도	
Employer Name 직장명		Business Type 업종		Dept. 담당부서	Position 직위
Business Address 사업체주소	Street	Cit	ty Star	te	Zip
Employer Phone# 직장전화		Fax# 팩스		E-mail 이메일	

Business Plan

Type of Business 선정사업	1 ST CHOICE	2 ND CHOICE	3 RD CHOICE
Business Name 상호명			
Business Plan 사업계획서	(본인의 계획을 간략하게 설명하여	주십시오.)	

^{*} Please attach your own business plan with application 본인의 사업계획서를 첨부하시기 바람.

Financial Information

Applicant's Name 성명	First Name 이름		Last Nam 성	ie		DOB 생년월일	Mon	Day	Yr		
Current Home Address 현자택주소	Street			City		State		Zip			
Years in	Yr Mon	Residence Ty	ype 주거지형타	Ownership	› 소유권	Value (If you owned) Rent (If you rent)					
Present Address 거주기간		House□ Co-Op□	Condo□ Others□	Own□ I	Rent□	\$	\$ PITI			Per Mon	
Previous Home Address 전자택주소	Street	!	City					State Zip			
Co-Applicant's Name 성명(If necessary)	First Name 이름	e Last Name 성					Sex 성별 Male 남 □ Female 여 □				
Current Home Address 현자택주소	Street			City		State		Zip			
Years in	Yr Mon	Residence Ty	ype 주거지형타	Ownership	› 소유권	Value (If yo	ou owned)	Rent	(If you rent)		
Present Address 거주기간		House□ Co-Op□	Condo□ Others□	Own□ I	Rent□	\$	PITI	\$		Per Mon	
Previous Home Address 전자택주소	Street			City		State		Zip			
Gross Annual Incom	e 연간총수입		Applica	ant		С	o-Applica	nt (If ne	ecessary)		
Base Salary 기본급		\$			3	3					
Over Time 초과수당		\$			9	5					
Bonuses 성과급		\$			9	\$					
Commissions 수수료		\$			9	\$					
Dividends 배당금		\$				\$					
Net Rental Income 순입	대수익금	\$ \$									
Retirement / Disability 9	<u></u> 연금	\$ \$									
Others 기타		\$			3	\$					
Others 기타		\$			9	\$					
Total 총수입		\$			3	\$					
Self-Employed 자영입	4	,	YES ()	NO ()		YES () NO ()					
		,	Assets Inform	ation (Appli	cant)						
Bank Name 은행명	Checking Accoun	t# 당좌계좌	Balance 잔고		Attn. 담당지	사 성명	Pho	ne#			
Bank Name 은행명	Saving Account#	저축예금계좌	\$ Balance 잔고		Attn. 담당지	담당자 성명 Phone#					
Credit Union 신용조합	Attn.담당자성명	Phone#	\$ Stocks	조 주신	Bonds 채권	Ca	sh Value of	l ife Insu	rance 새명	부 허	
	711111111111111111111111111111111111111	1 HOHE#		, , ¬			on value of	LIIC IIISU		<u>-</u> - П	
\$ Present Residence	Mkt. Value 평가액		\$ Mtge	Balance 유지금	\$	\$ Ler	nder 대출자				
(If owned)				Balance II AI E		Lei	idoi 레르시				
Other Assets (Specify)	\$		\$								
Onlet Assets (Specify)											

		A	ssets Ir	ntormatio	on (Co-App	olicant)			
Bank Name 은행명	Checking Accou	unt# 당좌계좌	Baland	ce 잔고		Attn. 담당자 성명		Phone#	
			\$						
Bank Name 은행명	Saving Account	# 저축예금계좌	Baland	ce 잔고		Attn. 담당자 성명		Phone#	
			\$						
credit Union 신용조합	Attn.담당자성명	Phone#	I	Stocks 3	주식	Bonds 채권	Cash V	/alue of Life Insurance 생명보험	
\$				\$		\$	\$		
Present Residence	Mkt. Value 평기	·액	Mtge.	Balance 8	당자금	Lender 대출자			
(If owned)	\$		\$						
Other Assets (Specify)			1			1			
(List outsta	anding obligatio	ns including aut			ormation 재 ge payments		onal loa	ns and other loans.)	
Types 종류		Creditors Nar	ditors Name 채권자		Unpaid Balance 채부금액			Monthly Payment 월납입금	
					\$		\$		
					\$		\$		
	\$		\$						
					\$		\$		
		Addition	al Mon	thly Obli	gations 기E	타 매월변제액			
Alimony	Ch	ild Support			Child Care		0	thers	
\$	\$				\$		\$		
Others	Oth	ners			Others		0	thers	
\$	\$				\$		\$		
Are there any outstandin (If yes, explain the details of				ations?	YES () NO	()	А	Amount \$	
and all of the a submitted in write Any modification Management for	above infor ting and is n to the rer final appro connection	mation is of subject to the modeling place. The Modeling place wal. The Modeling place was a subject to the modeling place.	currei the aj lan m lanag	nt and pprova nust be jement	comple I of the I submitt Licenso	te. The final Management ed in writing or or Licenso	plan Licer withir r's age	e best of their knowledge for remodeling must be nsor, or Licensor's agent. n reasonable time to the ent assumes no liabilities ducting business in the	

Date

Print Name

Signature by the Applicant

Business Plan

