

FINANCIAL STATEMENT

**TO THE COUNTY OF ARLINGTON – INSPECTION SERVICES DIVISION – ARLINGTON, VIRGINIA 22201
BUILDING INSPECTIONS SECTION**

Name of Applicant _____

Trade Name Used _____

Business Address _____

For the purpose of procuring license for the above named applicant, the following is submitted as being a true and accurate statement of the financial condition of the undersigned as of the close of business on the _____ day of _____, 20____. (If financial has been recently prepared by applicant – they may substitute it in place of this form). Schedules 1 thru 4 on reverse side:

| Assets | Amount | Liabilities | Amount |
|------------------------------------------------------------|-----------------|-------------------------------------------|-----------------|
| Cash on hand & bank demand deposits | \$ _____ | Notes payable – due within one year: | |
| Savings deposits | _____ | To banks (Schedule 4) | \$ _____ |
| U.S. Government Securities | _____ | To others (Schedule 4) | _____ |
| Other Securities (Detail Schedule 1) | _____ | Accounts payable | _____ |
| Cash Surrender Value of Life Ins. | _____ | Taxes Payable | _____ |
| Accounts Receivable | _____ | Other Current Liabilities | _____ |
| Notes receivable (within 1 year) | _____ | | |
| Merchandise Inventory | _____ | | |
| Other current assets: | _____ | Real Estate Mortgages | |
| | | (Schedule 3) | _____ |
| Mortgages Receivable (Schedule 3) | _____ | Notes Payable (Due in more than one year) | |
| Notes receivable (more than 1 yr.) | _____ | To Banks (Schedule 4) | _____ |
| Real Estate – at cost (Schedule 3) | _____ | To Others (Schedule 4) | _____ |
| Excess of Real Est. Market Value over Cost (Schedule 3) | _____ | Other Liabilities: | |
| Machinery & Equipment (Dep. Book val.) | _____ | _____ | _____ |
| Automobiles (list year & make) | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Other Assets: | | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| TOTAL ASSETS | \$ _____ | TOTAL LIABILITIES | \$ _____ |
| | | NET WORTH | _____ |
| | | TOTAL LIABILITIES & NET WORTH | \$ _____ |

| INCOME | AMOUNT | SCHEDULE OF LIFE INSURANCE | AMOUNT |
|-----------------------------|-----------------|-----------------------------|-----------------|
| SOURCE | | COMPANY | |
| Income from salary, etc. | \$ _____ | _____ | \$ _____ |
| Bonds & Commissions | _____ | _____ | _____ |
| Interest, Dividends & Rents | _____ | _____ | _____ |
| Other: | | _____ | _____ |
| _____ | _____ | _____ | _____ |
| TOTAL INCOME | \$ _____ | TOTAL LIFE INSURANCE | \$ _____ |

(continued on reverse side)

SCHEDULE 1 – OTHER SECURITIES

| Amount or No. of Shares | Company or Political Entity | Type Security | Market Value |
|-------------------------|-----------------------------|---------------|--------------|
| | | | |
| | | | |
| | | | |

SCHEDULE 2 – MORTGAGES RECEIVABLE

| Property Description and Location | 1st or 2nd Mortgage | Balance | Terms |
|-----------------------------------|---------------------|---------|-------|
| | | | |
| | | | |
| | | | |

SCHEDULE 3 – REAL ESTATE OWNED

| Property Description and Location | Market Value | Cost | Excess of Market Value Over Cost | Balance |
|-----------------------------------|--------------|------|----------------------------------|---------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE 4 – NOTES PAYABLE

| To Whom Payable | Collateral Pledged | Balance | Terms |
|-----------------|--------------------|---------|-------|
| | | | |
| | | | |
| | | | |

The foregoing statements and details pertaining thereto, both printed and written, have been carefully read and the undersigned hereby solemnly declares and certifies that same is a full and correct exhibit of my/our financial condition.

Date _____, 20____ Signature _____

Prepared by: _____ Title _____

_____ Signature _____

Title _____ Title _____

Position held relative to Applicant: _____

Sworn and subscribed to me this _____ day of _____, 20____

Notary Public _____

My Commission Expires _____