



Name of Applicant: _____

1. Does any Applicant have any financial interest in any of the properties they manage? Yes No
If Yes, provide details. _____

2. Does the Applicant act as a General Partner for any limited partnerships? Yes No
If Yes, provide details. _____

3. Does the applicant form or organize group investments or syndications, i.e., limited partnerships, real estate investment trusts or corporations for the purpose of investing in real estate? Yes No
If Yes, provide details. _____

4. Is the applicant involved with property development or construction activities? Yes No
If Yes, provide details. _____

5. Indicate the percentage of total fees derived from the following:

Commercial _____%	Industrial _____%
Residential _____%	Agricultural _____%

6. Is a budget prepared for each managed property? Yes No

7. Are you involved in space merchandising? Yes No

8. Are credit reports obtained on prospective tenants? Yes No

9. Are you responsible for negotiating, effecting or maintaining insurance coverage on the managed properties? Yes No

The undersigned, being authorized by and acting on behalf of the Applicant, warrants that to the best of his/her knowledge, and after making inquiry of other firm members, the above statements are true and agrees that this Questionnaire shall be the basis of coverage and considered part of any policy issued by the Company.

	Signed:	
Date		(Formal Signature by Owner, President or Chief Executive Officer)
		Title