



COMMERCIAL REAL ESTATE LOAN APPLICATION
PERSONAL FINANCIAL STATEMENT AS OF _____ Date

Submitted to:

PERSONAL INFORMATION					
APPLICANT (NAME)			CO-APPLICANT (NAME)		
Home Address			Home Address		
Home Phone No.	Cell Phone No.	Fax No.	Home Phone No.	Cell Phone No.	Fax No.
Email Address			Email Address		
Social Security No.		Date of Birth	Social Security No.		Date of Birth
Employer			Employer		
Address of Employer			Address of Employer		
Business Phone No.	No. of Years with Employer	Title/Position	Business Phone No.	No. of Years with Employer	Title/Position
Name of previous employer & position (if with current employer less than 3 yrs.)		No. of Yrs.	Name of previous employer & position (if with current employer less than 3 yrs.)		No. of Yrs.
Name / Phone No. of your Accountant			Name / Phone No. of your Accountant		
Name / Phone No. of your Attorney			Name / Phone No. of your Attorney		
Name / Phone No. of your Insurance Advisor			Name / Phone No. of your Insurance Advisor		

Cash Income & Expenditures Statement For Year Ended _____ (Omit Cents)

ANNUAL INCOME	AMOUNT (\$)
Salary (applicant)	
Salary (co-applicant)	
Bonuses & Commissions (applicant)	
Bonuses & Commissions (co-applicant)	
Rental Income	
Dividend/Interest Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Alimony/Child Support	
Social Security	
Pension	
Other Income (List)**	
TOTAL INCOME	

ANNUAL EXPENDITURES	AMOUNT (\$)
Federal Income and Other Taxes	
State Income and Other Taxes	
Rental Payments, Co-op, or Condo Maintenance	
Mortgage Payments	Residential Investment
Property Taxes	Residential Investment
Interest & Principal Payments on Loans	
Insurance	
Investments (including tax shelters)	
Alimony / Child Support	
Tuition	
Other Living Expense	
Medical Expenses	
Other Expense (List)	
TOTAL EXPENDITURES	

Any significant changes expected in the next 12 months? Yes No (if yes, attach information).

**Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

Schedule B - Insurance

Life Insurance (use additional sheet if necessary)

Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership

Disability Insurance	Applicant	Co-Applicant
Monthly Distribution if Disabled		
Number of Years Covered		

Schedule C - Personal Residence & Real Estate Investments, Global Mortgage Debt

Personal Residence / Investment Property Address	No. of Units	Legal Owner/ % owned	Purchase		Market Value	Present Loan Balance	Monthly Loan Payment (Not Including Ins./Taxes)	Total Annual Income	Total Annual Expenses (Including Ins./Taxes)	Lender & Loan Number
			Year	Price						
Please use separate attached sheet in loan package if more space is required.										
Total										

Schedule D - Partnerships (Other than Real Estate)*

Type of Investment	Date of Initial Investment	Cost	Percent Owned	Correct Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date
Business / Professional (Indicate name):						
Investments (Including Tax Shelters):						

*Note: For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Schedule E - Notes Payable

Due to	Type of Facility	Amount of Line	Secured		Collateral	Interest Rate	Maturity	Unpaid Balance
			Yes	No				
			<input type="checkbox"/>	<input type="checkbox"/>				
			<input type="checkbox"/>	<input type="checkbox"/>				
			<input type="checkbox"/>	<input type="checkbox"/>				
			<input type="checkbox"/>	<input type="checkbox"/>				

Please Answer The Following Questions:

1. Income tax returns filed through (date): _____ Are any returns currently being audited or contested? Yes No
If yes, what year(s)? _____
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? Yes No
If yes, please provide details: _____
3. Have you drawn a will? Yes No
If yes, please furnish the name of the executor(s) and year will was drawn: _____
4. Number of dependents (excluding self) and relationship to applicant: _____
5. Have you ever had a financial plan prepared for you? Yes No
6. Did you include two years federal and state tax returns? Yes No
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)? Yes No
If so, please indicate where, how much, and name of banker: _____
8. Have you directly or indirectly been obligated on any loan which resulted in a foreclosure, transfer or title in lieu of foreclosure, or judgment? (This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond or loan guarantee?) Yes No
If "Yes", please provide details, including date, name and address of Lender, FHA or VA case number, if any, and reasons for the action. _____

9. Do you anticipate any substantial inheritances? Yes No
If yes, please explain: _____

Representations and Warranties

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquires you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Date

Your Signature

Date

Co-Applicant's Signature (if you are requesting the financial accommodation jointly)

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Office of Thrift Supervision, 1475 Peachtree St. N.E., Atlanta, GA 30309.

Information for Government Monitoring Purposes

The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "Race". The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

Applicant:

I do not wish to furnish this information

Ethnicity:

- Hispanic or Latino
 Not Hispanic or Latino

Race:

- American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

Sex:

- Female
 Male

Co-Applicant:

I do not wish to furnish this

Ethnicity:

- Hispanic or Latino
 Not Hispanic or Latino

Race:

- American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific
 White

Sex:

- Female
 Male

To be Completed by Interviewer

Interviewer's Name (print or type)

Name and Address of Interviewer's employer

This application was taken by:

- Face-to-face interview
 By mail
 By telephone

Interviewer's Signature

Interviewer's Phone Number (incl. area code)