

COMMERCIAL REAL ESTATE LOAN APPLICATION PERSONAL FINANCIAL STATEMENT AS OF

Date

			T	PERSONAL J	INFORMATION						
APPLICANT (NAME)					CO-APPLICANT (NAME)						
Home Address					Home Address						
Home Phone No.	Iome Phone No. Cell Phone No. Fax No.					Ce	Cell Phone No. Fax No.				
Email Address		I			Email Address			I			
Social Security No.		Date of Bir	th		Social Security No.			Date of Birt	e of Birth		
Employer	Employer					Employer					
Address of Employer					Address of Employer						
Business Phone No.	No. of Year Employer	's with	Title/Po	sition	Business Phone No. No. of Years with Employer Title/				Title/Pos	sition	
Name of previous emp less than 3 yrs.)	Name of previous employer & position (if with current employer No. of Yrs. less than 3 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 (\$)	ANNUAL EXPENDITURES	AMOUNT (\$)
Salary (applicant)		Federal Income and Other Taxes	
Salary (co-applicant)		State Income and Other Taxes	
Bonuses & Commissions (applicant)		Rental Payments, Co-op, or Condo Maintenance	;
Bonuses & Commissions (co-applicant)		Mortgage Payments Residential Investment	
Rental Income		Property Taxes Residential Investment	
Dividend/Interest Income		Interest & Principal Payments on Loans	
Capital Gains		Insurance	
Partnership Income		Investments (including tax shelters)	
Other Investment Income		Alimony / Child Support	
Alimony/Child Support		Tuition	
Social Security		Other Living Expense	
Pension		Medical Expenses	
Other Income (List)**			
		Other Expense (List)	
TOTAL INCOME		TOTAL EXPENDITURES	

Any significant changes expected in the next 12 months? □ Yes □ I 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.

Balance Sheet as of _

ASSETS	AMOUNT	LIABILITIES	AMOUNT (\$)
Cash in this Bank		Notes Payable to this Bank	
(including money market accounts, CDs)		Secured	
Cash in Other Financial Institutions (List)		Unsecured	
(including money market accounts, CDs)		Notes Payable to Others (Schedule E)	
		Secured	
		Unsecured	
		Accounts Payable (including credit cards)	
		Margin Accounts	
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule D)	
Non-Readily Marketable Securities (Schedule A)		Taxes Payable	
Accounts and Notes Receivable		Mortgage Debt (Schedule C)	
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)	
Residential Real Estate (Schedule C)		Other Liabilities (List):	
Real Estate Investments (Schedule C)			
Partnerships / PC Interests (Schedule D)			
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts.			
Deferred Income (number of years deferred)			
Personal Property (including automobiles)			
Other Assets (List):			
TOTAL ASSETS		TOTAL LIABILITIES	
		NET WORTH	

General Questions	YES	NO	AMOUNT
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation or partnership?			\$
Do you have any outstanding letters of credit or surety bonds?			
Are there any suits or legal actions pending against you?			
Are you contingently liable on any lease or contract?			
Are any of your tax obligations past due?			
Are you a U.S. Citizen?			
Are you a permanent resident alien?			
If yes for any of the above, give details:			

Schedule A - A	Il Securities (inc	luding non-mone	ey market mutua	al funds)			
No. of Shares (Stock) or Face Value (Bonds)	DESCRIPTION	OWNER(S)	WHERE HELD	COST	CURRENT MARKET VALUE	PLEDGED YES NO	
READILY MARK	ETABLE SECURIT	TIES (including U.S.	Government and M	unicipals)*			
NON-READILY N	MARKETABLE SEC	CURITIES (closely he	eld, thinly traded, or	restricted stock)			

*If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B - Insuran Life Insurance (use a		essary)				
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 - Persor	nal Res	idence & Re	al Estat	e Invest	ments, G	lobal M	ortgage Deb	t		
Personal Residence / Investment Property Address	No. of Units	Legal Owner/ % owned	Purch Year	ase Price	Market Value	Present Loan Balance	Monthly Loan Payment (Not Including Ins./Taxes)	Total Annual Income	Total Annual Expenses (Including Ins/Taxes)	Lender & Loan Number
		Please use se	parate at	ttached sl	heet in loa	in packag	ge if more spa	ce is require	d.	
	I	I	I	Total						

Schedule D - Partnerships (Other	• than Real E	state)*				
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 P	ayable							
Due to	Type of Facility	Amount of Line	Secured Yes No		Collateral	Interest Rate	Maturity	Unpaid Balance

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?
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? \Box Yes \Box No
6. Did you include two years federal and state tax returns?
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)?
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)
5 11	enied, you have the right to a written statement of the specific reasons for the denial. We will send you a written 0 days of receiving your request for the statement.
origin, sex, marital status, age (provided the	ty Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from 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:	Co-Applicant:
I do not wish to furnish this information information	☐ I do not wish to furnish this
Ethnicity: Hispanic or Latino Not Hispanic or Latino	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 Islander White	Race: American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific White
Sex: Female Male	Sex: □ Female □ Male
To be Completed by Interviewer	
Interviewer's Name (print or type)	

Name	and	Address	of	Interviewer	's	employ	<i>ier</i>
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This application was taken by:

Interviewer's Signature

Face-to-face interview By mail By telephone

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Interviewer's Phone Number (incl. area code)