

Real Estate Type:	BJECT PROPERT			`	·	loonitality	Building	a Sizo:	Sq. Ft.
Real Estate Type.	☐ Office ☐ Warehouse ☐ Industrial ☐ Retail ☐ Restaurant ☐ Hospitality ☐ Car Wash ☐ Mixed-Use ☐ Multi-Family ☐ Other:					поѕрітанту	_		
Otas at Adda as							Sq. Ft.		
Street Address:							ent Marke		
City:					ate:	Zip Code:		County:	
Building Structure:	☐ Concrete Tilt-Up [Wood					
# Units:	# Stories:	Year –	Built:		Year Renovated	:	Zon	ing	
PURCHASE MONEY	LOAN								
Purchase Price: \$		Down	Payment:	\$	S	ource of Dowr	n Payment	t:	
REFINANCE LOAN									
Original Purchase Pri	ice:	\$			Date of Purc	hase:	_		
Costs for Constructio	n/Renovation (if any):	\$			Year Constru	uction Comple	ted:		
OCCUPANCY									
Current:	Owner Occup	ancy		%	Tenant Occupan		%	6 Vacancy	%
After Loan Clo	oses: Owner Occup	ancy		%	Tenant Occupan	су	%	% Vacancy	%
SECTION 2. LO	AN REQUEST AN	D US	E OF PRO	CEE	S (REQUIRE	D)			
Purpose				ount	Purpose			· ·	Amount
A. Land & Building A	cquisition		\$			ce – 1 st Trust I			
B. New Building Construction			\$ I. Refinance – 2 nd Trust Deed (details below) \$						
C. Land Acquisition (if construction)									
D. Contingency for Cost Overruns (10%)									
E. Construction Loan		\$ L. Closing Costs				\$			
F. Soft Costs (i.e. Arc	, etc.).	M. Other:				\$			
G. Building Renovations/Improvements			N. Other:						
			Total Estir	nated I	Project Amount (A	A through N).		\$	
			Less Appli	cant's C	Cash / Equity Inject	ion		\$	
			Less Seller	Financ	cing (explain terms	and condition	s below)	\$	
TOTAL LOAN(S) REQUESTED FOR PROJECT\$									
REFINANCE DETAIL	LS								
Lender	r Name	Origin	ation Date	Origir	nation Amount	Current Bala	ance	Monthly Payment	SBA Loan?
1 st Trust Deed:				\$		\$		\$	□ Yes □ No
2 nd Trust Deed:			\$			\$		\$	□ Yes □ No
3 rd Trust Deed:				\$		\$		\$	□ Yes □ No
EXPLANATIONS. P	rovide Details for Cas	h Out,	Other Uses	of Proc	eeds, Terms of S	eller Financir	ng and an	y loans used for Do	wn Payment.

SECTION 3. VESTING OF I	REAL ESTATE TITLE (REQUIRED)			
Title to the Property Is / Will Be Held (print exact names of individuals/entity)	i By:			
Type of Organization:	orp 🗆 S-Corp 🗆 LLC 🗆 LLP 🗆 LP 🗆 GP 🗆	Sole Prop State	of Organization:	
corporate officers regardless of own	ted Liability Company (LLC) members, and stoc lership. For Partnership or LLC, identify the Mar le identified as part of this application and signed	naging/General Partne		
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	
SECTION 4. PRIMARY BO	RROWER (REQUIRED)			
Name:			Office Phone:	
E-Mail:			Mobile Phone:	
SECTION 5. APPLICANT C	OMPANY (ONLY COMPLETE IF PRO	PERTY WILL BE	OWNER OCCUPIE	D)
Operating Company Name: (if applicable)		DBA:		
Type of Organization:	orp 🗆 S-Corp 🗆 LLC 🗆 LLP 🗆 LP 🗆 GP 🗆	Sole Prop State	of Organization:	
Franchise Operation? Yes	No Do you export? ☐ Yes ☐ No Do y	ou have any previous	SBA or government debts	? ☐ Yes ☐ No
Mailing Address:		Suite #:	Phone:	
City:	State:	Zip Code:	Fax:	
Website:			EIN (SSN sole prop):	
Date Company Founded:	Date of Current Ownership:		NAICS (from tax return):	
# of Locations: # of	of Employees (current / after financing):	/ Primary Com (name & prox		
Description of Business: (attach brochures/info)			<u></u>	
How will this loan benefit your Business?				
Type of Business: ☐ Serv	ice □ Retail □ Wholesale □ Mfg. □ Distribu	tion		
Is the company 51% or more:	Woman-owned? ☐ Yes ☐ No Veteran-ow	ned? □ Yes □ No	Minority-owned?	Yes □ No
Business Trends: Increasing	Explain what factors have impacted your t	rends:		
☐ Stable ☐ Decreasing				
corporate officers regardless of own	ted Liability Company (LLC) members, and stoc ership. For Partnership or LLC, identify the Mar e identified as part of this application and signed	naging/General Partne		
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	
Name:	Title:		Ownership:	%
Address:	City:	State:	Zip Code:	

SECTION 5. (CONTINUED)									
EXISTIN	IG LOCATION(S)								
Address:		Sq	Ft.	Mo. Rent	: \$		To be replace	ed?	□ Yes □ No
Address:		Sq	Ft.	Mo. Rent	: \$		To be replace	ed?	□ Yes □ No
Address:				Mo. Rent	: \$			ed?	□ Yes □ No
AFFILIA	TES AND SUBSIDIARI	ES							
20% owne	all business/investment concership or controlling interest. A is less than 20%. (Search for	Affiliation also exists	where an ind	lividual(s) has contr					
Company	Name:	Owned By:			Own	ership:	%		
Address:					NAICS:		# Empl	oyees:	
Description	n of Business/Purpose:				=	-			
Company	Name:	-	-	Owned By:		Ownership:			%
Address:					NAICS:	NAICS: # Employees:			
Description	n of Business/Purpose:				_				
Company	Name:			Owned By:			Own	ership:	%
Address:					NAICS:		# Empl	oyees:	
Descriptio	n of Business/Purpose:				_				
SCHED	ULE OF BUSINESS DE	BTS							
sheet, as p	t all contracts, notes, lines of c provided with this loan applica ide accounts payable. Use atta	tion (Figures should	reconcile wit	th most recent Tax	Return or In	iterim Financi	ial Statement	provide	
								_	
Payoff?	To Whom Payable (current lender)	Original Amount	Original Date	Current Balance	Interest Rate	Maturity Date	Monthly Payment		Collateral
Payoff? ☐ Yes						,		C	Collateral
□ Yes		Amount		Balance	Rate	,	Payment	(Collateral
☐ Yes ☐ No ☐ Yes		Amount		Balance	Rate	,	Payment	C	Collateral
☐ Yes ☐ No ☐ Yes ☐ No		Amount \$		Balance \$	Rate %	,	Payment \$		Collateral
☐ Yes ☐ No ☐ Yes		Amount \$		Balance \$	Rate %	,	Payment \$	C	Collateral
☐ Yes☐ No☐ Yes☐ No☐ Yes☐ Yes☐ Yes☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes		Amount \$ \$ \$		\$ \$ \$	% %	,	Payment \$ \$	(Collateral
☐ Yes ☐ No ☐ No ☐ No		Amount \$		\$ \$	Rate %	,	Payment \$	(Collateral
Yes		Amount \$ \$ \$ \$		\$ \$ \$ \$	% % %	,	Payment \$ \$ \$	C	Collateral
Yes		Amount \$ \$ \$		\$ \$ \$	% %	,	Payment \$ \$	C	Collateral
Yes		Amount \$ \$ \$ \$ \$		\$ \$ \$ \$ \$	% % %	,	Payment \$ \$ \$ \$ \$		Collateral
Yes		Amount \$ \$ \$ \$		\$ \$ \$ \$	% % %	,	Payment \$ \$ \$		Collateral
Yes		Amount \$ \$ \$ \$ \$		\$ \$ \$ \$ \$	% % %	,	Payment \$ \$ \$ \$ \$		Collateral
Yes		Amount \$ \$ \$ \$ \$ \$ \$		s s s s	% % % %	,	Payment \$ \$ \$ \$ \$ \$		Collateral
Yes		Amount \$ \$ \$ \$ \$ \$ \$		s s s s	% % % %	,	Payment \$ \$ \$ \$ \$ \$		Collateral
Yes		\$ \$ \$ \$ \$ \$ \$		s s s s s s	% % % %	,	Payment \$ \$ \$ \$ \$ \$ \$ \$ \$		Collateral
Yes		\$ \$ \$ \$ \$ \$ \$ \$ \$		s s s s s s	% % % %	,	Payment \$ \$ \$ \$ \$ \$ \$ \$ \$		Collateral
Yes	(current lender)	\$ \$ \$ \$ \$ \$ \$ \$ \$	Date	\$ S S S S S S S S S S S S S S S S S S S	% % % %	Date	Payment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Collateral
Yes	(current lender)	Amount \$ \$ \$ \$ \$ \$ \$ \$ \$ T: Is lender authorize per's contact information and the second action of the second	Date ed to contact yation may exp	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ your accountant? pedite the loan appropriate the loan appropri	% % % % % % % % % % % % % % % % % % %	Date	Payment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		

SECTIO	ON 6. D	ECLARATIONS ((REQUIRED)								
☐ YES	□ NO		ectors, or principals ever bee				ernment?				
□ YES	□ NO		Are any business or personal taxes delinquent? If 'Yes', copies of payment arrangements and a detailed explanation is required on a separate sheet (sign & date)								
☐ YES	□NO	Has the company, or any officer or principal of the company ever been involved in bankruptcy or insolvency proceedings? If 'Yes', copies of the proceedings and a detailed explanation of the bankruptcy is required on a separate sheet (sign & date)									
☐ YES	□ NO	Has the company, or any officer or principal of the company ever had property in foreclosure or given title or deed in lieu? If 'Yes', copies of the foreclosure or deed in lieu and a detailed explanation is required on a separate sheet (sign & date)									
☐ YES	□ YES □ NO Is the company or any of its principals involved in any pending lawsuits, liens or judgments? If 'Yes', a detailed explanation is required on a separate sheet (sign & date)										
SECTIO	ON 7. A	DDITIONAL COM	MENTS								
ACKNO	OWLED	GEMENT AND AG	REEMENT (REQUIR	ED)							
The undersigned certifies that all statements in this application and each document required to be submitted in connection herewith, including Federal Income Tax Returns are true, correct and complete. The undersigned authorize all employment information, deposits, checking and/or savings accounts, obligations, borrowing information and all other credit information to be released by telephone, email or fax to Lender/Broker, its successors and/or assignees, or any credit reporting bureau. Your signature below acts not only under your authority and capacity within the entity you represent in making this business credit application; but also is an effective waiver and consent to Lender/Broker, its successors and/or assignees to verify any information it deems necessary on you as an individual to include, but not limited to, your individual credit bureau information. Each of the undersigned is a principal, a personal guarantor or the sole proprietor of the Applicant and acknowledges that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant. Accordingly, the undersigned hereby consents and authorizes Lender/Broker, its successors and/or assignees to rely on such statements, make such inquiries and gather such information as it deems necessary to verify any information provided to Lender/Broker, its successors and/or assignees on this application or any such required document, including inquiries to the IRS, business credit reporting and credit bureau agencies, and further authorizes Lender/Broker, its successors and/or assignees or this designee the use of a consumer credit report on the undersigned, from time to time as may be needed. The authorization must allow pulling the individual's credit bureau for three reasons: 1) this application, 2) update/extension/renewal of this credit, and 3) collection efforts on the resulting account. A fax or photocopy of this authorization shall be valid as the original. The undersigned further agrees to notify Lender/Brok											
	•	•	ed Partner, Manager or Sto	ockholder own	ing 20% or more, a	nd each Guarantor mus	t sign.				
Each pei	son shou	uld only sign once.									
Print Applica	ant Name		Applicant Signature		Date	SSN	Date of Birth				
Print Applica	ant Name		Applicant Signature		Date	SSN	Date of Birth				
Print Applica	ant Name		Applicant Signature		Date	SSN	Date of Birth				
Print Applica	ant Name		Applicant Signature		Date	SSN	Date of Birth				

Applicant Signature

Print Applicant Name