

Spouse: Applicant's spouse must complete the CO-APPLICANT section if applicant is relying on spouse's income as a basis for repayment of the credit, or if the applicant resides in Arizona, California, Hawaii, Idaho, Louisiana, Michigan, Nebraska, Nevada, New Mexico, Oklahoma, Oregon, Texas, or Washington.

PERSONAL INFORMATION

APPLICANT

Full Name*:	
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Birth*:
Social Security Number*:	Home Phone Number:
e-mail:	Cell Phone Number:
Home address*:	
Home city, state, ZIP*:	
Check one: <input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly rent or mortgage payment: \$
Number of years at this address:	

CO-APPLICANT

Full Name*:	
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Birth*:
Social Security Number*:	Home Phone Number:
e-mail:	Cell Phone Number:
Home address*:	
Home city, state, ZIP*:	
Check one: <input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly rent or mortgage payment: \$
Number of years at this address:	

***DISCLOSURE A: Federal law requires us to collect and verify this information. A Post Office Box will not suffice. We are required to obtain a street address.**

EMPLOYMENT INFORMATION

Do you own your own business? <input type="checkbox"/> Yes <input type="checkbox"/> No	Years at current position (if retired, date of retirement)?	Do you own your own business? <input type="checkbox"/> Yes <input type="checkbox"/> No	Years at current position (if retired, date of retirement)?
Employer's name:		Employer's name:	
Employer's phone number:		Employer's phone number:	
Employer's address:		Employer's address:	
Employer's city, state, ZIP code:		Employer's city, state, ZIP code:	
Job title:	Occupation:	Job title:	Occupation:
Gross Income – Monthly:\$		Gross Income – Monthly:\$	
Other income** Source: \$ Per month \$ Per year		Other income** Source: \$ Per month \$ Per year	

**** DISCLOSURE B: Alimony, child support or separate maintenance income need not be revealed if you do not wish it considered as a basis for repayment.**

BUSINESS INFORMATION (Entities you own personally)

Name of Business	Complete Address	Phone / Fax
Fiscal Year End	Product / Services Sold	Web Page
Number of Employees	Federal Tax ID Number (EIN)	State / Date of Incorporation
Principals Name:	% Ownership:	Title:

APPLICANT / CO-APPLICANT					
Are either of you obligated to make alimony, child support or separation maintenance payments?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, amount per month?
Are there any unsatisfied judgments against either of you?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, to whom owed?
Do either of you have any contingent liabilities?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please describe:
Have either of you ever declared bankruptcy?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please give date?
DETAILS					
Aircraft will be: <input type="checkbox"/> Pre-Approval <input type="checkbox"/> Refinance <input type="checkbox"/> New Purchase <input type="checkbox"/> Used Purchase					
Year	Make	Model	FAA N#	S/N	
Last Annual Date		TTAF	RE SMOH	LE SMOH	
Selling Price: \$		Cash Down: \$	Trade: \$	Loan Amount: \$	Terms Desired (yrs):
Estimated Closing Date		Seller Name/Phone number:			
Previous aircraft / Current aircraft financed by:					
Type of Pilot Certificate: <input type="checkbox"/> Student <input type="checkbox"/> Private <input type="checkbox"/> Commercial <input type="checkbox"/> ATP <input type="checkbox"/> None					
Current Hrs / Ratings / Endorsements:					
Do you have previous aircraft ownership experience? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide details:					
Aircraft will be registered to: <input type="checkbox"/> Individual <input type="checkbox"/> Co-ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other					
Name of registration entity:				Tax ID Number:	
Aircraft will be based at:			How did you hear about us?		
How will aircraft be utilized? <input type="checkbox"/> FAA Part 91 Business (personal and/or use within your own business) <input type="checkbox"/> Pleasure <input type="checkbox"/> Part 135 (commercial / leaseback / flying club / flight training use)					

DISCLOSURES: Consent to Use of a Consumer Credit Report: The undersigned individual(s) recognize that personal credit history may be a factor in the evaluation of the credit history or credit worthiness of the applicant or in the evaluation of his or her personal guarantee of the obligations of the credit applicant (if applicable). Further, a condition of credit approval may include their guarantee, and the undersigned hereby instruct and authorize Nations Capital and its lenders, including all subsidiaries thereof (collectively "NC") to obtain and use consumer credit reports pertaining to each individual's credit history and/or credit worthiness from any credit reporting agency from which NC receives such reports, in connection with the application for the extension of credit by NC. In connection with any such application for credit, the undersigned further agrees that NC's permission to obtain a consumer credit report on the undersigned and any guarantor shall be ongoing and shall relate not only to the evaluation and/or extension of the credit requested, but also for purposes of reviewing the account. Increasing the credit line on the account (if applicable), taking collection action on the account, and for any legitimate business purpose associated with the account as may be needed from time to time.

I/We further authorize NC to give data contained in this application and credit information about any guarantor to its subsidiaries, affiliates and agents. I/We can prevent NC from sharing such information, other than information about NC's transactions, experience with guarantor, or as permitted by law, by calling the creditor at the phone number listed on this application.

Release of Credit Information: Authorization is hereby granted to all credit reporting agencies, banks, and all other companies to release credit and financial information to NC from time to time, which NC deems necessary to establish and maintain credit. I/We further authorize any company or individual from whom I/We may have obtained or requested credit to furnish NC with the details of that transaction. I/We agree to provide current financial information upon request, in a form acceptable to NC.

Equal Credit Opportunity Act Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, handicap, marital status, age (provided that 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 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 Federal Trade Commission.

Request for Credit – – Please read below, check the appropriate box, sign and date.

I/We certify that the information herein and any other information submitted at any other time to NC has been carefully read and is true, correct and complete. I/We authorize and its lenders: (i) to review my/our credit and employment histories and any other information in order to process this application, service my/our account, and manage its relationship with me/(us, and (ii) to communicate with others, to the extent permitted by law, such information and its experience with me. I/We are submitting all such information with the intent to secure financing and understand that lenders rely on this information in evaluating and granting the credit requested.

<input type="checkbox"/>	I am requesting credit as an individual in my own name and am relying on my own income and assets and not the income and assets of another person.		
<input checked="" type="checkbox"/>	I am requesting credit jointly or an account that I will use with another person. We intend to apply for joint credit.		
Signature of Applicant		Date	Signature of Co-Applicant
			Date

NATIONS CAPITAL

Borrower Certification of Principals

Please list information for the borrowing entity and **each** Key Principal or major partner (*defined as ownership of 10% or more*). If any ownership share is by an entity, then a separate completed form is required for each partner entity. *We are required to have and verify this information in accordance with US and International law.*

Borrower Registration:

Name of Borrowing Entity	Registered Address	State/Country of Organization	Date of Organization

Principals:

Name	Tax ID/SS Number	Address	Relationship to Entity	Percentage of Ownership

I hereby certify that I am the authorized principal for the Borrowing Entity listed above, and that this information is true and accurate to the best of my knowledge and belief as of this date.

Name: _____

Signature: _____

Date: _____

Personal Financial Statement

Business Real Estate Financing

A complete and signed Personal Financial Statement (PFS) is required from each individual guarantor. Co-guarantors with joint assets and liabilities can be included on one joint PFS. However, if any assets or liabilities are not joint, a separate PFS is required from each individual even if the co-guarantor is a spouse/domestic partner. Please complete each relevant supporting schedule.

Guarantor/Applicant Name (First MI Last): _____

Co-Guarantor/Co-Applicant Name (guaranteeing spouses/domestic partners only): _____

Business Name: _____

Financial Statement Schedules

Schedule 1: Cash in Bank Accounts

Account Description/Account Owner	Name of Bank	Current Balance
		\$
		\$
		\$
		\$
Total		\$

Schedule 2: Publicly Traded Investments – stocks, bonds, mutual funds, 401k, IRAs

Account Description	Name Registered In	Shares/Amount	Retirement	Current Value
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Total				\$

Schedule 3: Other Assets – vehicles, boats, partnerships, proprietorships, cash-value life insurance

Property Description	Name Registered In	Current Value
		\$
		\$
		\$
		\$
Total		\$

Schedule A: Total Revolving Credit – credit cards, credit lines

To Whom Payable	Description	Commitment Amount	Monthly Payment	Current Balance
				\$
				\$
				\$
				\$
Total				\$

Schedule B: Total Installment Loans – boats, cars, furniture

To Whom Payable	Description	Monthly Payment	Current Balance
			\$
			\$
			\$
			\$
Total			\$

Schedule C: Other Liabilities – contract debts, maintenance payments, lawsuits, tax penalties

To Whom Payable	Description	Monthly Payment	Current Balance
			\$
			\$
			\$
Total			\$

Schedule D: Contingent Liabilities – partnerships, guarantees

To Whom Payable	Description	Monthly Payment	Current Balance
			\$
			\$
			\$
Total			\$

Guarantor/Applicant Real Estate Schedule**Property Type: SF = Single Family, MF = Multiple Family, C = Commercial/Industrial, L = Land/Acreage**

Property Use	Primary Residence	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> Business	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> Business
Property Type	<input type="checkbox"/> SF <input type="checkbox"/> MF	<input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	<input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Name(s) Registered In			
Ownership % (use whole numbers only)	_____ %	_____ %	_____ %
Co-Owned with Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address			
City, State, ZIP Code			
Date Purchased			
Purchase Price			
Estimated Market Value			
1st Mortgage Balance			
Lender			
Interest Rate	_____ %	_____ %	_____ %
Maturity Date			
1st Mortgage Payment			
All Other Mortgage/Liens (include loans or equity lines)			
Lender(s)			
Payments – other Mortgage			
Annual Property Tax			
Annual Property Insurance			
Taxes and Insurance Escrowed by Lender	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gross Monthly Rent			

Property Type: SF = Single Family, MF = Multiple Family, C = Commercial/Industrial, L = Land/Acreage

Property Use	Primary Residence	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> Business	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> Business
Property Type	<input type="checkbox"/> SF <input type="checkbox"/> MF	<input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	<input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Name(s) Registered In			
Ownership % (use whole numbers only)	_____ %	_____ %	_____ %
Co-Owned with Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address			
City, State, ZIP Code			
Date Purchased			
Purchase Price			
Estimated Market Value			
1st Mortgage Balance			
Lender			
Interest Rate	_____ %	_____ %	_____ %
Maturity Date			
1st Mortgage Payment			
All Other Mortgage/Liens (include loans or equity lines)			
Lender(s)			
Payments – other Mortgage			
Annual Property Tax			
Annual Property Insurance			
Taxes and Insurance Escrowed by Lender	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gross Monthly Rent			

Real Estate Holdings Attachment – Totals	
Total Market Value	\$
Total Mortgage(s) Balance	\$

Assets of Borrower	Amount
Cash in Bank Accounts (Schedule 1)	\$
Publicly Traded Investments (Schedule 2)	\$
Other Assets (Schedule 3)	\$
Residence Market Value (RE Schedule)	\$
Other Real Estate Market Value (RE Schedule)	\$
Total Assets	\$

Liabilities of Borrower	Amount
Total Revolving Credit (Schedule A)	\$
Total Installment Loans (Schedule B)	\$
Other Liabilities (Schedule C)	\$
Mortgage on Residence (RE Schedule)	\$
Mortgage(s) on Other Real Estate (RE Schedule)	\$
Total Liabilities	\$
Net Worth	\$

Annual	Amount
Salary	\$
Commissions	\$
Cash Distributions from Individual/Business:	\$
Dividends/Interest	\$
Rental Income	\$
Alimony/Child Support* (disclosure not required):	\$
Other Sources	\$
Total Annual Income	\$

Annual	Amount
Salary	\$
Commissions	\$
Cash Distributions from Individual/Business:	\$
Dividends/Interest	\$
Rental Income	\$
Alimony/Child Support* (disclosure not required):	\$
Other Sources	\$
Total Annual Income	\$

General Information

	Guarantor/Applicant	Co-Applicant
1. Have you ever filed bankruptcy or have you been a principal or guarantor of a business entity that filed bankruptcy, or was the debtor in an involuntary bankruptcy case? (If "Yes," explain below)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you ever been convicted of a felony? (If "Yes," explain below)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are you a co-signer or guarantor of any other debt? (If "Yes," explain below)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

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Date: _____
(mm/dd/yyyy)