



CONSULTING
Your Business Is Our Business

LOAN APPLICATION | APPLICANTS/GUARANTORS

Name:	Name:
Business/Home Address:	Business/Home Address:
Business/Home Telephone:	Business/Home Telephone:
Cell Number:	Cell Number:
Date of Birth:	Date of Birth:
Email:	Email:

I, the undersigned, hereby authorize J&M Consulting Firm and/or its affiliates or partners to verify all information with regard to, but not limited to credit history, employment history, warehouse line of credit accounts, bank accounts, any accounts payable, investor relationships and all other information deemed necessary in connection with my application for approval. I authorize the release of loan balances, ratings or any other pertinent information requested by J&M Consulting Firm and/or its affiliates or partners. I authorize J&M Consulting Firm and/or its affiliates or partners to reproduce this authorization as needed to obtain complete information. A copy of this instrument bearing my signature carries the same authority as the original. I/we hold your company, officers and employees harmless for furnishing true and correct information.

I/we fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014.

Applicant/Guarantor SSN:	Applicant/Guarantor SSN:
Applicant/Guarantor Signature:	Applicant/Guarantor Signature:
Date:	Date:

CONSTRUCTION/REHAB WORK SHEET

PROPERTY ADDRESS:

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TYPE OF COLLATERAL

Single Family <input type="checkbox"/>	Multi-Family <input type="checkbox"/>	Mixed Use <input type="checkbox"/>	Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>
Office <input type="checkbox"/>	Retail <input type="checkbox"/>	Restaurant <input type="checkbox"/>	Hotel/Motel <input type="checkbox"/>	Other

PROPERTY DESCRIPTION

Year Built	Site Sq Ft	Usable Sq Ft	# of Stories	# of Units

ZONING

Legal/Conforming <input type="checkbox"/>	Legal/Nonconforming <input type="checkbox"/>	Nonconforming <input type="checkbox"/>
Other:		
Note: Your tax bill or deed will reflect this.		

DEAL INFORMATION

Requested Loan Amount:	\$
Purchase Price:	\$
Rehab/Repair Cost (Attach Breakdown):	\$
Cash Personally Brought to Closing:	\$
Estimated After Repair Value (ARV):	\$
Proposed LTV:	
As-Is Value:	\$
Annual Property Tax:	\$
Does the property require permits?	
Is new plumbing required?	
Is new electricity required?	
Is the property under contract?	

USE OF FUNDS/SCOPE OF WORK

(Describe how you intend to use the proceeds/work to be completed)

Last 5 Properties Renovated

Address	LLC Used to Purchase the Property	Purchase Date	Rehab Amount	Purchase Price	Sold Date	Sold Price	Rented or Flipped
1.							
2.							
3.							
4.							
5.							

PERSONAL FINANCIAL STATEMENT

(Please complete a separate statement for each Applicant/Guarantor)

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	

Business Name of Applicant/Borrower

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks		Accounts Payable	
Savings Accounts		Notes Payable to Banks and Others	
IRA or Other Retirement Account		(Describe in Section 2)	
Accounts & Notes Receivable		Installment Account (Auto)	
Life Insurance-Cash Surrender Value Only		Mo. Payments	
(Complete Section 8)		Installment Account (Other)	
Stocks and Bonds		Mo. Payments	
(Describe in Section 3)		Loan on Life Insurance	
Real Estate		Mortgages on Real Estate	
(Describe in Section 4)		(Describe in Section 4)	
Automobile – Present Value		Unpaid Taxes	
Other Personal Property		(Describe in Section 6)	
(Describe in Section 5)		Other Liabilities	
Other Assets		(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	
Total		Net Worth	
		Total	

Section 1. Source of Income	Contingent Liabilities
Salary	As Endorser or Co-Maker
Net Investment Income	Legal Claims & Judgment
Real Estate Income	Provision for Federal Income Tax
Other Income (Describe below)*	Other Special Debt

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Bank and Others (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

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Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

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Section 7. Other Liabilities. (Describe in detail.)

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Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries)

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I authorize J&M Consulting Firm and all affiliates to make inquires as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan

Signature:	Date:	Social Security Number:
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Signature:	Date:	Social Security Number:
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ADDITIONAL QUESTIONS:

Do you know the seller?
Why is the seller motivated to Sell?
What is the estimated closing date?
How much cash can you bring to closing?
What is the exit?
What is your full time job?
What is name of the LLC or Corporation requesting the loan?
Who is your general contractor?
Have you used him before?
What can you tell us about the neighborhood your property is located in?
What is the number of properties presently owned?
What is the estimated value of all properties owned?
What is your credit score?
Are you or anyone else associated with this loan a United States citizen?
Is this an arm's length transaction? (Yes/No)
How is the property being sourced? (Short sale, REO, Foreclosure auction, Sheriff sale, MLS, private sale, wholesaler or other)
Do you intend to increase the square footage? Please explain.
How many years of real estate experience do you have?
How many flips have you done in your lifetime?
How many flips have you done in the last 12 months?

THIS QUESTIONNAIRE WAS COMPLETED BY:

Name:
Title:
Firm:
Address:
Telephone #:
Date:
If the preparer is different than the user, please complete the following:
Name of User:
Address of User:
Telephone of User:
Preparer's Relationship to Site:
Preparer's Relationship to User (e.g., principal, employee, agent, consultant):
Copies of the completed questionnaire have been filed at:
Copies of the completed questionnaire have been mailed/delivered to:

PREPARER REPRESENTS THAT TO THE BEST OF THE PREPARER'S KNOWLEDGE THE ABOVE STATEMENTS AND FACTS ARE TRUE AND CORRECT AND TO THE BEST OF THE PREPARER'S KNOWLEDGE, NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

Signature:	Date:
Name (Printed):	

Signature:	Date:
Name (Printed):	