



Real Estate Finance Credit Application

**Thank you for submitting your financing application to Leonard Capital Advance
For the fastest service, please include the following information:**

- ☐ Real Estate Finance Credit Application
- ☐ Detailed Use of Funds

ATTACH:

- ☐ Current Mortgage and/or Line of Credit Statements, if applicable
- ☐ Last 3 Months of **Complete** Business Bank Statements
- ☐ Business Tax Return: Previous Year
- ☐ Personal Tax Return: Previous Year
- ☐ Property Rent Roll, if applicable
- ☐ Previous Property Appraisals, if available
- ☐ Property Financial Statements: Last 2 Years and Current Year Interim Financial Statement

Please email your application package to:

Larry@LeonardCapitalAdvance.com



REQUEST FOR FINANCING			
Use of Financing (Select all that apply):: <input type="checkbox"/> Working Capital <input type="checkbox"/> Other <input type="checkbox"/> Debt Consolidation		Financing Amount Requested: \$	Down Payment Amount: \$
BUSINESS INFORMATION			
Legal Name of Business:		Is Business in Good Standing / Active? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Established:	Tax ID#	Business Type: <input type="checkbox"/> Corp <input type="checkbox"/> LLC <input type="checkbox"/> Sole-Proprietor	
All Officer(s) / Member(s) with Ownership ≥ than 10% (Attach additional pages if necessary)			
1 - Name:		Title:	Ownership %:
2 - Name:		Title:	Ownership %:
3 - Name:		Title:	Ownership %:
Address of Business Location:		City, State, Zip:	
Mailing Address (if different):		City, State, Zip:	
Main Phone:	Fax:	# of Employees:	
Business Email:		Type of Business:	
Are you the majority-owner of the company? (If NO, please answer question below) <input type="checkbox"/> Yes <input type="checkbox"/> No			
What is your current position at the company?			
Has your business been involved in any Repossessions and / or Tax Liens? (If Yes, Explain Below) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for Repossessions and / or Tax Liens (w/ date):			
GUARANTORS - PERSONAL INFORMATION – Each Member with Ownership ≥ than 10% (Attach additional pages if necessary)			
Guarantor		Co-Guarantor (Spouse)	
Name:		Name:	
SSN:	Birthdate:	SSN:	Birthdate:
Homeowner or Renting?		Homeowner or Renting?	
Primary Home Address:		Primary Home Address:	
City, State, Zip:		City, State, Zip:	
Main Phone:		Main Phone:	
Mobile Phone:		Mobile Phone:	
Email:		Email:	
Current Bankruptcy / Child Support? Yes <input type="checkbox"/> No <input type="checkbox"/>		Current Bankruptcy / Child Support? Yes <input type="checkbox"/> No <input type="checkbox"/>	

REAL ESTATE SCHEDULE

- List each property separately.
- Use attachment if necessary; identify attachments as part of this application and sign each one.
- Please provide most recent Mortgage Statements for all properties with active lien.

	Property A	Property B	Property C
Type of Property (SFR, Office, Retail Industrial, Multifamily, Infill Land)			
Address			
Date Purchased			
Original Cost			
Current Market Value			
1 st Lien Mortgage Balance			
2 nd Lien Mortgage Balance			
3 rd Lien Mortgage Balance			
Is Mortgage Current or Delinquent?			
Square Feet of Structure(s)			
Square Feet of Lot			
Annual Expenses			
Annual Taxes			
Annual CapEx			
Annual Income			

Additional Real Estate Information:

PERSONAL FINANCIAL STATEMENT

Name:		Title:	
Total Assets (Omit Cents)		Total Liabilities (Omit Cents)	
Cash Accts. (Checking, Savings, Brokerage)	\$	Installment Accounts (Auto)	\$
Retirement Accts. (IRA, Roth IRA, SEP IRA, 401k)	\$	Installment Accounts (Other)	\$
Accounts Receivables & Notes Receivables	\$	Accounts / Notes Payable & Other Liabilities (Describe in Section 2)	\$
Life Insurance Cash Surrender Value Only	\$	Loans on Life Insurance	\$
Real Estate Owned (Describe in Real Estate Schedule)	\$	Mortgages Against Real Estate (Describe in Real Estate Schedule)	\$
Other Personal Property & Assets (Describe in Section 3)	\$	Unpaid Taxes (Describe in Section 4)	\$
Total Asset Value	\$	Total Liabilities	\$

PERSONAL FINANCIAL STATEMENT, cont.



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

Description of "Other Income"

*Alimony and/or child support payments does not need to be disclosed in "Other Income" unless you want such payments counted toward Total Income.

Section 2. Accounts / Notes Payable to Banks & Other Liabilities (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.) Please attach a separate Accounts Payable list if it doesn't fit in this section.

Name and Address of Noteholder(s)	Original Balance	Current Balance	P a	Frequency (monthly, daily, etc.)	Secured with collateral? (if yes, explain)

Section 3. Other Personal Property & Assets (If any asset is pledged as security, include name and address of the lienholder, amount of the lien & terms of payment.)

Section 4. Unpaid Taxes (Include type, to whom payable, when due, amount, and to what property, and if there are any tax liens against the property. Please also provide any tax collector documentation or correspondence.)

ECOA DISCLOSURE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on 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 FTC Regional Office for region in which the creditor operates or Federal Trade Commission, Consumer Response Center, Washington, DC 20580. If we take adverse action you have a right to a statement of specific reasons for the adverse action if you request such statement within 60 days from Maxim Commercial Capital, LLC at the address and telephone number given on this application. The written statement shall be sent to you within 30 days. Adverse action may include refusal to grant credit in substantially the amount or terms requested, termination or an unfavorable change in the terms of an account and refusal to increase the amount of credit available.

APPLICANT VERIFICATION

The undersigned acknowledges the statements on this application are true, correct and accurate to the best of my knowledge, and the information contained herein may be used by Maxim Commercial Capital, LLC (Maxim) to make credit decisions. The undersigned authorizes Maxim and its affiliates to obtain any consumer and/or business information from banks, credit unions, as well as other credit reporting services, and authorizes them to furnish such information to Maxim. The undersigned acknowledges that this signed application is an application for credit only, and the final terms of the financing agreement will be based on the documents themselves. No commitment exists until the Applicant/Joint Applicant(s) receives the same in writing from Maxim.

Guarantor Signature:	Date:
Co- Guarantor Signature:	Date: