# SUBMISSION PACKAGE

## INITIAL DOCUMENTATION CHECKLIST

- 1. Loan Application\*
- 2. Strategy Letter\*
- 3. Investor Experience & Portfolio\*
- 4. Credit Card Authorization Form\*
- 5. Bank Statements 2 months most recent (all pages with name & account # visible)
- 6. Copy of Photo ID
- 7. LLC / Corporation Documentation (if holding title in entity)
  - a. Articles of Organization / Incorporation
  - b. Operating Agreement / Bylaws
- 8. Specific Transaction Documents
  - a. If purchase transaction fully executed, valid purchase contract
  - b. If refinance transaction payoff demand or mortgage statement
- 9. If property requires rehab provide rehab bid/itemized list of work w/ associated costs
- 10. If property is currently leased, provide:
  - a. Executed lease agreement(s)
  - b. Rent roll and P&L statement for subject property (if multi-family)

\*Specified item is included in this Submission Package

If e-signing any documents, must be a verified e-signature through a service such as Adobe or DocuSign.

### IMPORTANT NOTES

- Non-Owner Occupied properties Investor Loans Only.
- ACH (automatic payments) is required. ACH is a scheduled electronic payment made from your checking or savings account.
- Impound account for taxes & insurance is required on 2 & 4 year loan terms.
- All loans are fixed rate with interest only payments.
- Balloon payment due at end of loan term.

LOAN APPLICATION -	Borrower Deta	ils									
BORROWER / AUTHORIZE	SIGNER INFORM	MATION									
Individual's Name:		Marital Status: 🛛 Marri	ied 🗆 (	Unmarrie	ed 🗆 S	Separated					
Primary Residence Address:											
City:			Zip Cod	e:							
Do you own or rent your primary resider	nce: 🗆 Own 🛛 Re	nt Number of years at primary	residence	ə?							
Mailing Address (if different from primar	y residence):										
Primary Phone Number:											
Secondary Phone Number:		Employment mormation	Employment Information								
Email Address:											
Date of Birth:		Position & Title:									
Social Security Number:		Employer Address:									
			- )								
CO-BORROWER / AUTHOR											
Individual's Name:		Marital Status: 🛛 Marr	ied 🗆	Unmarrie	ed⊔S	Separated					
Primary Residence Address:	N	Married to	Borrowe	er? □ Ye	es 🗆 No						
City:		State:	Zip Cod	e:							
Do you own or rent your primary resider	nce: 🛛 Own 🗆 Rent	Number of years at primary	residenc	e?							
Mailing Address (if different from primar	y residence):										
Primary Phone Number:		Employment Information									
Secondary Phone Number:			Self-Employed: Yes No								
Email Address:			Employer Name:								
Date of Birth:		Position & Title:									
Social Security Number:		Employer Address:									
DECLARATIONS / QUESTIO	NNAIRE										
Please check YES or NO for each of th			Borro			rrower					
Are there any outstanding judgements agai	nst you?		Yes	No	Yes	No					
Have you been declared bankrupt within the	e last seven (7) years?										
Have you or any other entity of which you w was foreclosed upon?	vere/are a principal been in	foreclosure or had any property that									
Are you party to lawsuit?											
Are you presently delinquent on any federa loan guarantee?	I debt or any other loan, mo	ortgage, financial obligation, bond, or									
Have you ever been convicted of a felony?											
Are you in a Civil Union or a Domestic Parti party to a Designated Beneficiary Agreeme		non-borrowing spouse, or are you a									
Are you a US citizen?											
Are you a permanent resident alien?											
Do you intend to occupy the property as yo	ur primary residence?										
FINANCIAL STATEMENT				T							
Estimated Total Annual Income	\$	Estimated Current Liquid Assets: (cash or can be converted to cash within 30 days)		\$							
Cash in Bank	\$	Real Estate Owned \$									

#### LOAN APPLICATION - Transaction Details SUBJECT PROPERTY INFORMATION Subject Property Address: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Property Type: \_\_\_\_\_ Number of Units: \_\_\_\_\_ Occupancy: Leased Vacant Cross-Collateralization: Yes No If YES, # of properties: \_\_\_\_\_ (Provide all addresses on a separate spreadsheet) LOAN REQUEST INFORMATION Purchase □ Rate & Term Refinance □ Cash-Out Refinance Transaction Type: Loan Amount Requested: \$\_\_\_\_\_ Loan Term Request: 1 Year 2 Year 4 Year Purchase Price: \$ \_\_\_\_\_ Estimated Property Value: \$\_\_\_\_\_ If refinance, complete the following: Current debt on property: \$\_\_\_\_\_ Original Cost: \$\_\_\_\_\_ Year Acquired: Amount of rehab completed (if any): \$\_\_\_\_\_ BORROWER / ENTITY INFORMATION Title will be held in what name(s): Corporation Personal Name Limited Partnership Type: INTERIOR ACCESS CONTACT INFORMATION FOR SUBJECT PROPERTY Contact Name: Phone Number: (or lock box number) Relationship: Email: ESCROW / CLOSING COMPANY INFORMATION Phone Number: Company Name: Email: Closing Agent: DECLARATION OF NON-OWNER OCCUPANCY & BUSINESS USE OF PROCEEDS I ("Borrower") certify and represent to lender ("Originator") as follows: I hereby declare that I have no intention of making the property (subject property listed in my loan application) my principal residence. Additionally, I declare that I have no intention of utilizing the property as a second home and/or any surviving spouse or family member shall live in the property. I understand that this loan is a business purpose loan and not a household purpose loan. The loan proceeds are intended to be used and shall be used for business purpose only, not for personal use. I represent that I understand the difference between consumer loan for personal purposes and a commercial loan for business purposes. I represent that this loan is not a consumer loan and therefore is not subject to any laws relating to consumer loans under any state or federal laws such as Truth in Lending Act (15 U.S.C. § 1601 et seq.), Real Estate Settlement Procedures Act (12 U.S.C. § 2601 et seq.), Gramm-Leach Bliley Act (15 U.S.C. §§ 6802–6809), Secure and Fair Enforcement Mortgage Licensing Act (12 U.S.C. § 5101 et seg.), and Homeowners Protection Act (12 U.S.C. § 4901 et seq.).

I realize the lender, broker, assignees and successors rely upon this information. I confirm I have read and understand this document. I declare under penalty of perjury the foregoing is true and correct.

#### AUTHORIZATION TO CONDUCT CREDIT & BACKGROUND CHECK

By signing this form, I/we hereby authorize lender to conduct a background and/or credit check. Additionally, the undersigned and each party to this loan, authorizes lender to disclose to any third party, employee, agent or assignee thereof information regarding background and credit experience.

I understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of title 18, United States code, 1014. I also understand that the lender intends to use the data obtained through the investigation for due diligence purposes only, and shall not disclose such information to any other party except as otherwise authorized above.

Entity / Company Name (if applicable)

Borrower / Authorized Signer Name (print)

Co-Borrower / Authorized Signer Name (print)

Signature (Borrower / Authorized Signer) Date

Signature (Co-Borrower / Authorized Signer) Date

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# STRATEGY LETTER

1.	I understand that I am applying for a non-owner occupied, business purpose investment loan.
2.	What is your plan for this property?
3.	If Fix & Flip, what do you anticipate your hold time to be? months
4.	If Fix & Flip, what do you estimate the ARV (after repair value) to be: \$
5.	If Rental Property, the monthly rental income is / will be: \$
6.	Explain your investment strategy for this property in detail:
7.	What is your exit strategy and how do you intend to repay this loan? Sell Property Refinance Other - Please explain in detail
8.	If cash-out refinance, how do you intend to use the cash-out proceeds? Please explain in detail.
9.	Do you intend to rehab or upgrade the subject property? If YES, what do you estimate your construction, rehab, and/or updating costs will be? Please explain in detail the scope of work. (If costs exceed \$10,000, please provide an itemized rehab bid / outlined scope of work with your submission)

Entity / Company Name (if applicable)

Borrower / Authorized Signer Name (print)

X Signature (Borrower / Authorized Signer)

Co-Borrower / Authorized Signer Name (print)

Date

X Signature (Co-Borrower / Authorized Signer) Date

## INVESTOR EXPERIENCE & PORTFOLIO

Borrower / Authorized Signer Name (print)

Co-Borrower / Authorized Signer Name (print)

How many non-owner occupied, investment properties have you had a controlling interest in (including those you have sold) within the last:

12 months: \_\_\_\_\_

36 months: \_\_\_\_\_

Ever:

# Please complete the tables below - OR - provide a separate Schedule of REO and Recently Sold Properties

CURRENT SCHEDULE	JRRENT SCHEDULE OF REAL ESTATE OWNED										
Address	City	State	Zip	Entity/Name on Title	% of Ownership	Acquisition Date	Investment Type	Property Type	Present Market Value	Mortgages & Liens	Net Rental Income

RECENTLY SOLD PRO	ECENTLY SOLD PROPERTIES									
Address	City	State	Zip	Entity/Name on Title	% of Ownership	Acquisition Date	Disposition Date	Purchase Price	Rehab Cost	Disposition Price

### CREDIT CARD AUTHORIZATION FORM

Sign and complete this form to authorize Civic Financial Services to make a debit to your credit card listed below for property valuation services. By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a debit, and does not provide authorization for any additional unrelated debits or credits to your account.

I authorize Civic Financial Services to charge my credit card account for the amount indicated in the below pricing schedule:

Interior BPO (per property)	\$295
Commercial Evaluation (5+ units)	\$625
Appraisal* - ask your AE for an appraisal quote	TBD

\*Appraisals are required on properties where value or sales price exceeds \$2,000,000 in CA and \$1,500,000 in all other states. Typical appraisal costs are between \$500 - \$1,200.

#### CREDIT CARD INFORMATION

ACCOUNT #:			EXP. I	DATE:	_ CVV:
CREDIT CARD TYPE:	🗆 Visa	□ Mastercard		Discover	
Cardholder Name (as it appe	ears on your cre	edit card):			
Billing Address:					
City:		State:	Zip C	Code / Postal Code: _	

Signature:	Date:
•	

### DISCLAIMER

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the services described above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

This is not a commitment to lend. Restrictions may apply. LTV limits are based on current, accurate appraised value. Civic Financial Services, LLC reserves the rights to amend rates and guidelines. All loans are made in compliance with federal, state and local laws. Civic Financial Services, LLC, is a department of business oversight lender with DBO License# 6031321. Civic Financial Services, LLC, is an equal opportunity lender.

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