



### LOAN APPLICATION-Commercial or Multifamily

Loan Applied For	Amount	Interest Rate	Monthly Payment	Amort. Basis	Term	Escrow/Impounds (to be collected Monthly)
------------------	--------	---------------	-----------------	--------------	------	---

Prepayment Option: \_\_\_\_\_ Program Details: \_\_\_\_\_

<b>PURCHASE SUBJECT PROPERTY --</b> Settlement Date _____ per sales agreement (attach copy)						
Sales Price		Cash Down Payment		Source of Equity Funds (cash down payment and/or other - explain)		
Secondary Loan		Interest Rate	Monthly Payment	Terms		Payable To:
<b>REFINANCE SUBJECT PROPERTY -</b>					Describe Significant Improvements & Cost	
<b>Funds to be Used to Pay ▼</b>		Purchase Date		Purchase Price		
First Loan Balance	Maturity Date	Payable To:		Name & Address		Account No.
2nd Loan Balance	Maturity Date	Payable To:		Name & Address		Account No.
Remaining Funds to be used for:						

<b>CONSTRUCTION LOAN</b>				Estimated Time To Complete Construction		
Date Land Acquired		Cost	Existing Liens		Payable To:	
<b>USE OF FUNDS ▼</b>				<b>SOURCE OF FUNDS ▼</b>		
Pay Existing Liens				Loan Applied For		
Land Development Costs				Funds Invested by Owner		
Direct Construction Costs				Other:		
Indirect Construction Cost						
Total				Total		
General Contractor (attach Resume))				Explain Source of funds to be invested by owner and/or other		

SUBJECT PROPERTY ADDRESS						
Street Address			City	County	State	Zip
Legal Description (attach separate sheet, if necessary)			Site/Lot Size	# Buildings	No. Stories	No. Units
Title is in: <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold			Brief Description of Improvements, including type structural framing, exterior walls, heat & A/C & Recreation Facilities			

		<input type="checkbox"/> Current Estimates	<input type="checkbox"/> Proforma Estimates.
Gross Scheduled Income	\$ _____		\$ _____
Other Income (Laundry, Vending, CAM, etc.)	\$ _____		\$ _____
Total Gross Potential Income	\$ _____		\$ _____
Less Vacancy %:	% _____ \$ _____	% _____	\$ _____
Less Operating Expenses	% _____ \$ _____	% _____	\$ _____
Net Operating Income	\$ _____		\$ _____

PROPERTY TYPE (check applicable information)				
<input type="checkbox"/> Multifamily	<input type="checkbox"/> Office	<input type="checkbox"/> Self-Storage	<input type="checkbox"/> Industrial: R & D/Flex	<input type="checkbox"/> Retail-Anchored
<input type="checkbox"/> Mixed Use	<input type="checkbox"/> Medical Office	<input type="checkbox"/> Special Purpose	<input type="checkbox"/> Industrial: Warehouse	<input type="checkbox"/> Retail-Shadow Anchored
<input type="checkbox"/> Mobile Home Park	<input type="checkbox"/> Full Service Hotel	<input type="checkbox"/> Limited Service Hotel	<input type="checkbox"/> Single Tenant	<input type="checkbox"/> Retail-Unanchored
Other: _____		<input type="checkbox"/> Other	<input type="checkbox"/> Senior Housing	<input type="checkbox"/> Health Care

MULTIFAMILY PROPERTY		COMMERCIAL OR INDUSTRIAL PROPERTY	
# Vacant Units	Is Project Subject to Rent Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Vacant Sq Ft	Total Net Rentable Sq Ft.
Apartments are Rented	# Units	<b>LEASE TYPE</b>	
Furnished	_____	<input type="checkbox"/> Modified Gross	<input type="checkbox"/> Industrial Gross
Unfurnished	_____	<input type="checkbox"/> NNN	<input type="checkbox"/> MTM
Total # Section 8 (HUD) units	_____	<input type="checkbox"/> NN	<input type="checkbox"/> Other
Utilities Included In Rent		<input type="checkbox"/> N	<input type="checkbox"/> Mixed
<input type="checkbox"/> Water	<input type="checkbox"/> Gas	Other: _____	
<input type="checkbox"/> Electricity	<input type="checkbox"/> Heat or A/C		

PURPOSE OF TRANSACTION

PROPERTY INFORMATION





Borrowing Entity: \_\_\_\_\_  
 Property located at: \_\_\_\_\_  
 Loan Amount applied for: \_\_\_\_\_  
 Loan Application dated \_\_\_\_\_

**INDIVIDUAL (PERSONAL) FINANCIAL STATEMENT-ADDENDUM**

<b>Individual:</b> _____	<b>Spouse (If Applicable)</b> _____
Individual Address: _____	Spouse Address: _____
City: _____ State: _____	City: _____ State: _____
Zip: _____	Zip: _____
Phone Number: _____	Phone Number: _____
Alternate Phone Number: _____	Alternate Phone Number: _____
Fax Number: _____	Fax Number: _____
Marital Status: Married <input type="checkbox"/> Not Married <input type="checkbox"/>	Marital Status: Married <input type="checkbox"/> Not Married <input type="checkbox"/>

**Role in Borrowing Entity ( Individual, Borrower, Guarantor, etc.)**

Individual (s) <input type="checkbox"/>	General Partner <input type="checkbox"/>	Guarantor <input type="checkbox"/>	Managing Member <input type="checkbox"/>	Member <input type="checkbox"/>
Shareholder <input type="checkbox"/>	President <input type="checkbox"/>	Trustee <input type="checkbox"/>	Trust <input type="checkbox"/>	Co-Borrower <input type="checkbox"/>
*Other <input type="checkbox"/>	*Other: _____			

Years as Business Owner / Investor: \_\_\_\_\_ % owned of Borrowing Entity: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

<b>Individual:</b>	<b>Spouse (If Applicable)</b>
Employer: _____	Employer: _____
Employer Address: _____	Employer Address: _____
City: _____ State: _____	City: _____ State: _____
Zip: _____	Zip: _____
Self-Employed: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Self-Employed: Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Position/Title: _____	Position/Title: _____
Type of Business: _____	Type of Business: _____
Years on this Job: _____ Years in this Line of Work: _____	Years on this Job: _____ Years in this Line of Work: _____

Previous Employer (If less than 2 years):

Name: _____	Telephone No. _____
Address: _____	City _____ Zip Code _____
Type of Business: _____	Position / Title: _____
Income/Salary _____	Years on this Job: _____ Years in this Line of Work: _____

**MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION**

Primary Residence: Own  Rent  # of years: \_\_\_\_\_

			<b>Combined Monthly Housing Expense</b>		
			(For Primary Residence only)		
<b>Gross Monthly Income</b>	<b>Individual:</b>	<b>Spouse:</b>	<b>Total</b>		
A. Base Employee Income:	\$ _____	\$ _____	\$ _____	A. Rent:	\$ _____
B. Overtime:	\$ _____	\$ _____	\$ _____	B. First Mortgage (P & I):	\$ _____
C. Bonuses:	\$ _____	\$ _____	\$ _____	C. Other Financing (P & I):	\$ _____
D. Commissions:	\$ _____	\$ _____	\$ _____	D. Hazard Insurance:	\$ _____
E. Dividends/Interest:	\$ _____	\$ _____	\$ _____	E. Real Estate Taxes:	\$ _____
F. Net Rental Income:	\$ _____	\$ _____	\$ _____	F. Mortgage Insurance:	\$ _____
G. Other Income*:	\$ _____	\$ _____	\$ _____	G. Homeowner Assoc:	\$ _____
<b>Total:</b>	\$ _____	\$ _____	\$ _____	H. Other:	\$ _____

\* Describe other income: \_\_\_\_\_ **Total:** \_\_\_\_\_

**PERSONAL ASSETS**

Cash Deposit toward purchase held by (if applicable): \_\_\_\_\_ Account Balance: \_\_\_\_\_

**LIST ALL FINANCIAL ACCOUNTS BELOW**

Financial Institution/Acct #: \_\_\_\_\_ Joint Account:  Account Balance: \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Joint Account:  Account Balance: \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Joint Account:  Account Balance: \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Joint Account:  Account Balance: \_\_\_\_\_

Stocks & Bonds: \_\_\_\_\_ Joint Account:  Account Balance: \_\_\_\_\_

Stocks & Bonds: \_\_\_\_\_ Joint Account:  Account Value: \_\_\_\_\_

Life Insurance Net Cash Value \_\_\_\_\_

**Schedule of Real Estate Owned**

Vested Interest in Retirement Fund \_\_\_\_\_

Net Worth of Business Owned (attach financial statement) \_\_\_\_\_

Personal property including auto. \_\_\_\_\_

Other Assets (itemize): \_\_\_\_\_

**Total:** \_\_\_\_\_

**PERSONAL LIABILITIES**

**LIABILITIES ( REAL ESTATE) - ATTACH COMPLETED SCHEDULE OF REAL ESTATE OWNED**

**LIABILITIES - OTHER THAN REAL ESTATE**

	Balance	Monthly Payment
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Combined Real Estate Loans	\$ _____	\$ _____
<b>TOTAL:</b>		\$ _____

**APPLICANT NET WORTH** \_\_\_\_\_

**PERSONAL DECLARATIONS**

If you answer "Yes" to any questions A through F, please provide a separate explanation.

	Guarantor		Spouse	
	Yes	No	Yes	No
a. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you declared bankruptcy within the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are you party to a lawsuit? If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation bond or loan guarantee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are you obligated to pay alimony, child support or separate maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Is any part of the down payment borrowed? (N/A for refinances)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. If applicable, do you intend to occupy the property as your primary housing residence?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are you a U.S. citizen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Are you a permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PATRIOT ACT COMPLIANCE DISCLOSURE**

As required by federal law and Lenders policies and practices, "Lender" may need to collect certain information and documentation in connection with opening or maintaining accounts or establishing or continuing to provide services. In some cases, that documentation and information may also include evidence of identification and/or personally identifiable information of those authorized to act on your account which is acceptable to "Lender".

**BROKER DISCLOSURE**

Borrower has dealt with no broker other than \_\_\_\_\_ ("Broker" and Borrower will pay all fees and expenses owing to any mortgage broker and will indemnify and hold "Lender" harmless from any and all other brokerage claims related to this transaction, provided that borrower acknowledges that "Lender" reserves the right to pay the broker an underwriting and/or servicing fee in connection with the loan.

**INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

<b>INDIVIDUAL</b>	<input type="checkbox"/> I do not wish to furnish this information	<b>SPOUSE</b>	<input type="checkbox"/> I do not wish to furnish this information.
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Alaska Native <input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Other Pacific Islander	Race:	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Alaska Native <input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Other Pacific Islander
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male

**GENERAL AUTHORIZATION**

RECORDS, BANK ACCOUNTS, STOCK HOLDINGS AND ANY OTHER ASSET BALANCES NEEDED TO PROCESS MY LOAN

INFORMATION, INCLUDING PAST AND PRESENT MORTGAGE AND LANDLORD REFERENCES. IT IS UNDERSTOOD THAT A

\_\_\_\_\_  
Applicant Authorization/Signature      Social Sec. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
Co-Applicant Authorization/Signature      Social Sec. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

This application is for a business purpose loan secured by commercial real estate. The above signed specifically acknowledge and agree that (1) the loan requested by this application will be secured by a first mortgage or deed of trust on the property described herein; (2) the property will not be used for any illegal or prohibited purposes or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) occupation of the property will be as indicated above; (5) verification or reverification of any information contained in the application may be made at any time by the Lender, its agents, successors and assigns either directly or through a credit reporting agency, from any source named in this application, and the original copy of this application will be retained by Lender, even if the loan is not approved; (6) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/we have continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (7) in the event my/our payments on the loan indicated in this application become delinquent, the Lender its agents, successors and assigns, may, in addition to all their other rights and remedies, report my/our name(s) and account information to a credit reporting agency (8) ownership of the loan may be transferred to successors or assigns of the Lender without notice to me and/or the administration of the loan account may be transferred to an agent, successor or assign of the Lender with prior notice to me; (9) the Lender, its agents, successors and assigns make no representations of warranties, express or implied, to the Borrower(s) regarding the property, the condition of the property, or the value of the property; (10) I/we understand and hereby agree that all principals of the company have been identified to the Lender and will sign the note personally guaranteeing repayment of the obligation. I/we as signed above certify that the information provided in this loan application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001 et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application; and (11) my/our transmission of this application as an "electronic record" containing my/our "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my/our facsimile transmission of this application containing a facsimile of my/our signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact "Lender" by phone or mail within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the 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 the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C., 20580.



**BUSINESS ENTITY ASSETS**

Cash Deposit toward purchase held by (if applicable): \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

**LIST ALL FINANCIAL ACCOUNTS BELOW**

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Stocks-Bonds/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Stocks-Bonds/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Partnership/Corporation: \_\_\_\_\_ \$ \_\_\_\_\_

Retirement Fund: \_\_\_\_\_ \$ \_\_\_\_\_

Real Estate Owned: \_\_\_\_\_ \$ \_\_\_\_\_

Other Liquid Assets (itemize): \_\_\_\_\_ Other: \_\_\_\_\_ \$ \_\_\_\_\_

Other Assets (itemize): \_\_\_\_\_ Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

**BUSINESS ENTITY LIABILITIES**

**LIABILITIES ( REAL ESTATE) - Total Real Estate Loans:**

ATTACH COMPLETED SCHEDULE OF REAL ESTATE OWNED

**LIABILITIES - OTHER THAN REAL ESTATE**

	Balance	Monthly Payment
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
Creditor Name/Acct #: _____	\$ _____	\$ _____
<b>TOTAL:</b>	\$ _____	\$ _____

**BUSINESS ENTITY NET WORTH** \$ \_\_\_\_\_

**SUPPLEMENTAL ASSETS TO BE USED IN THE DOWN PAYMENT FROM NON-GUARANTORS AS LISTED ABOVE**

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Financial Institution/Acct #: \_\_\_\_\_ Account Balance: \$ \_\_\_\_\_

Bonds - Institution: \_\_\_\_\_ Account Value: \$ \_\_\_\_\_

Other Business Assets (Itemize): \_\_\_\_\_ Face Value: \$ \_\_\_\_\_

\_\_\_\_\_ Face Value: \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

**BUSINESS DECLARATIONS**

	True	False
Neither my business, nor any principal of my business has declared bankruptcy in the last 7 years.	<input type="checkbox"/>	<input type="checkbox"/>
Neither my business, nor any principal of my business is a party to any lawsuit.	<input type="checkbox"/>	<input type="checkbox"/>
My business has never defaulted on any Federal debt including SBA loans.	<input type="checkbox"/>	<input type="checkbox"/>
No principal of my business has had a property foreclosed within the past 7 years.	<input type="checkbox"/>	<input type="checkbox"/>
I have not had a business or occupational license revoked within the past 7 years.	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any declaration with "false" resposn \_\_\_\_\_

**GENERAL AUTHORIZATION**

I HEREBY AUTHORIZE "LENDER" TO VERIFY MY PAST AND PRESENT EMPLOYMENT, EARNING RECORDS, BANK ACCOUNTS, STOCK HOLDINGS AND ANY OTHER ASSET BALANCES NEEDED TO PROCESS MY LOAN APPLICATION.

I FURTHER AUTHORIZE NETWORK BANK USA TO ORDER A CREDIT REPORT AND VERIFY ALL OTHER CREDIT INFORMATION, INCLUDING PAST AND PRESENT MORTGAGE AND LANDLORD REFERENCES. IT IS UNDERSTOOD THAT A PHOTOCOPY OF THIS DOCUMENT SHALL ALSO SERVE AS AN AUTHORIZATION TO PROVIDE THE INFORMATION REQUESTED.

The undersigned is hereby representing that all data is correct, true and complete. Verification may be obtained from any source named in this application form and/or attachments. 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.

\_\_\_\_\_  
Signature Title Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_\_  
Signature Title Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Notice: This Business Entity Financial Statement serves as a current financial statement for the Business Entity only. Alternative documentation providing the requested information is acceptable as "See Attached" with the requested information is acceptable as "See Attached" with live signatures.

This application is for a business purpose loan secured by commercial real estate. The above signed specifically acknowledge and agree that (1) the loan requested by this application will be secured by a first mortgage or deed of trust on the property described herein; (2) the property will not be used for any illegal or prohibited purposes or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) occupation of the property will be as indicated above; (5) verification or reverification of any information contained in the application may be made at any time by the Lender, its agents, successors and assigns either directly or through a credit reporting agency, from any source named in this application, and the original copy of this application will be retained by Lender, even if the loan is not approved; (6) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/we have continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (7) in the event my/our payments on the loan indicated in this application become delinquent, the Lender its agents, successors and assigns, may, in addition to all their other rights and remedies, report my/our name(s) and account information to a credit reporting agency (8) ownership of the loan may be transferred to successors or assigns of the Lender without notice to me and/or the administration of the loan account may be transferred to an agent, successor or assign of the Lender with prior notice to me; (9) the Lender, its agents, successors and assigns make no representations of warranties, express or implied, to the Borrower(s) regarding the property, the condition of the property, or the value of the property; (10) I/we understand and hereby agree that all principals of the company have been identified to the Lender and will sign the note personally guaranteeing repayment of the obligation. I/we as signed above certify that the information provided in this loan application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001 et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application; and (11) my/our transmission of this application as an "electronic record" containing my/our "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my/our facsimile transmission of this application containing a facsimile of my/our signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact "Lender" by phone or mail within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the 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 the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C., 20580.



# Borrower/Guarantor's Certification & Authorization

Loan # \_\_\_\_\_

---

## CERTIFICATION

The undersigned certify the following:

I/We have applied for a mortgage loan from ICCC

In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentation in the loan application or other documents, nor did I/we omit any pertinent information.

I/We understand and agree the Lender reserves the right to verify the information provided on the application with the employer and/or the financial institution.

I/We fully 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 loan, as applicable under the provisions of Title 18, United States Code, Section 1014.

## AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I/We have applied for a mortgage loan from ICCC through their application process, and the Lender may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or at the time of the Lender's quality control program.

I/We authorize you to provide to the Lender and to the Lender's investors to whom the Lender may sell my mortgage loan, any and all documents that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balance; credit history; and copies of income tax returns.

The Lender, or any other investor that purchases the mortgage loan, may address this authorization to any party named in the application.

A copy of this authorization may be accepted as an original.

---

(Borrower/Guarantor's Signature)

---

(Tax ID or Soc. Security No.)

---

(Borrower/Guarantor's Signature)

---

(Tax ID or Soc. Security No.)

# Request for Transcript of Tax Return

Department of the Treasury  
Internal Revenue Service

- ▶ Do not sign this form unless all applicable parts have been completed.  
Read the instructions on page 2.
- ▶ Request may be rejected if the form is incomplete, illegible, or any required part was blank at the time of signature.

**TIP:** Use new Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506**, Request for Copy of Tax Return. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return	<b>2b</b> Second social security number if joint tax return  : : : :
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code	
<b>4</b> Address, (including apt., room, or suite no.), city, state, and ZIP code shown on the last return filed if different from line 3	
<b>5</b> If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.	

**CAUTION:** Lines 6 and 7 must be completed if the third party requires you to complete Form 4506-T. Do not sign Form 4506-T if the third party requests that you sign Form 4506-T and lines 6 and 7 are blank.

**6 Product requested.** Most requests will be processed within 10 business days. If the product requested relates to information from a return filed more than 4 years ago, it may take up to 30 days. Enter the return number here and check the box below. ▶ \_\_\_\_\_

- a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. Transcripts are generally available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years . . . . .
- b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns . . . . .
- c Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years . . . . .
- d Verification of Nonfiling**, which is proof from the IRS that you did not file a return for the year . . . . .
- e Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2003, filed in 2004, will not be available from the IRS until 2005. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213 . . . . .

**CAUTION:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**7 Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T.

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_     
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_     
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_     
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer.

<b>Sign Here</b>	Signature (see instructions)	Date	Telephone number of taxpayer on line 1a or 2a (    )
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	

## A Change To Note

• **New Form 4506-T**, Request for Transcript of Tax Return, is used to request tax return transcripts, tax account transcripts, W-2 information, 1099 information, verification of non-filing, and a record of account. **Form 4506**, Request for Copy of Tax Return, is now used only to request copies of tax returns.

## Instructions

**Purpose of form.** Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

**Where to file.** Mail or fax Form 4506-T to the address below for the state you lived in when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series) and one for all other transcripts.

**Note:** *If you are requesting more than one transcript or other product and the chart below shows two different service centers, mail your request to the service center based on the address of your most recent return.*

### Chart for individual transcripts (Form 1040 series)

If you lived in and filed an individual return:	Mail or fax to the Internal Revenue Service at:
Maine, Massachusetts, New Hampshire, New York, Vermont	RAIVS Team 310 Lowell St. Stop 679 Andover, MA 01810  978-691-6859
Alabama, Florida, Georgia, Mississippi, North Carolina, South Carolina, West Virginia, Rhode Island	RAIVS Team 4800 Buford Hwy. Stop 91 Chamblee, GA 30341  678-530-5326
Arkansas, Colorado, Kentucky, Louisiana, New Mexico, Oklahoma, Tennessee, Texas	RAIVS Team 3651 South Interregional Hwy. Stop 6716 Austin, TX 78741  512-460-2272
Alaska, Arizona, California, Hawaii, Idaho, Montana, Nevada, Oregon, Utah, Washington, Wyoming	RAIVS Team Stop 38101 Fresno, CA 93888  559-253-4992
Delaware, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, South Dakota, Wisconsin	RAIVS Team Stop B41-6700 Kansas City, MO 64999  816-823-7667
Ohio, Virginia	RAIVS Team 5333 Getwell Rd. Stop 2826 Memphis, TN 38118  901-546-4175

Connecticut, District of Columbia, Maryland, New Jersey, Pennsylvania, a foreign country, or A.P.O. or F.P.O. address

RAIVS Team  
DP SE 135  
Philadelphia, PA 19255-0695  
  
215-516-2931

### Chart for all other transcripts

If you lived in:	Mail to the Internal Revenue Service at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Washington, Wyoming	RAIVS Team Mail Stop 6734 Ogden, UT 84201  801-620-6922
Connecticut, Delaware, District of Columbia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800F Cincinnati, OH 45250  859-669-3592

**Line 1b.** Enter your employer identification number if your request relates to a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Signature and date.** Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 60 days of the date signed by the taxpayer or it will be rejected.

**Individuals.** Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

**Corporations.** Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

**Partnerships.** Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 7.

**All others.** See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

**Documentation.** For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. Sections 6103 and 6109 require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to Federal and state agencies to enforce Federal nontax criminal laws and to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 11 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Tax Products Coordinating Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **Do not** send the form to this address. Instead, see **Where to file** on this page.

