

# Commercial Loan Application

1. FINANCING REQUEST					
Requested Loan Amount \$ _____			Purpose of Loan: <input type="checkbox"/> Purchase <input type="checkbox"/> Refinance		
2. PROPERTY INFORMATION					
Subject Property Address: Street: _____ City: _____ State: _____ Zip code: _____ # of Units: _____ Will title be held in an entity? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, Entity Name: _____			Property Type: <input type="checkbox"/> 1-4 residential units <input type="checkbox"/> 5+ residential units <input type="checkbox"/> Mixed use <input type="checkbox"/> Retail <input type="checkbox"/> Warehouse <input type="checkbox"/> Office <input type="checkbox"/> Auto service <input type="checkbox"/> Other _____		
Refinance: <input type="checkbox"/> Year acquired: _____ Cost: _____ Purchase: <input type="checkbox"/> Purchase Price: _____			Improvements: <input type="checkbox"/> Made or <input type="checkbox"/> To be made \$ _____		
Does Applicant intend to live in the subject property for more than 14 days per year? <input type="checkbox"/> YES <input type="checkbox"/> NO			Does Co-Applicant intend to live in the subject property for more than 14 days per year? <input type="checkbox"/> YES <input type="checkbox"/> NO		
3. APPLICANT INFORMATION					
Applicant's Name:			Co-Applicant's Name:		
SSN #:	Phone Number:	DOB:	SSN #:	Phone Number:	DOB:
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried	Residency Status: <input type="checkbox"/> US Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-permanent Resident Alien		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried	Residency Status: <input type="checkbox"/> US Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-permanent Resident Alien	
Primary Residence (Street, City, State, Zip): _____			Primary Residence (Street, City, State, Zip): _____		
<input type="checkbox"/> Own <input type="checkbox"/> Rent		Number of Years: _____	<input type="checkbox"/> Own <input type="checkbox"/> Rent		Number of Years: _____
4. Employment Information					
Employer Name: _____		Yrs. On Job:	Employer Name: _____		Yrs. On Job:
Address (Street, City, State & Zip): _____		Monthly Income: \$ _____	Address (Street, City, State & Zip): _____		Monthly Income: \$ _____
Business Phone: _____		Self-employed: <input type="checkbox"/>	Business Phone: _____		Self-employed: <input type="checkbox"/>
Position/Title/Type of work:			Position/Title/Type of work:		
5. Real Estate Owned					

## Commercial Loan Application

Property Address:	Type of Property	Existing Mortgage
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
7.		\$

### 6. Agreement & Acknowledgement

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a business purpose mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the Loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors, and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

**Acknowledgement:** Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify any information contained in this application or obtain any information or data relating to the Loan, for any legitimate business purpose through any source, including a source named in this application or a consumer reporting agency.

Applicant Signature	Date:	Co-Applicant Signature	Date:
X _____		X _____	

### 7. Government Monitoring Information

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 not discriminate either on the basis of this information, or 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 and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below.

Applicant:  I do not wish to furnish this information      Co-Applicant:  I do not wish to furnish this information

<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male



PERSONAL FINANCIAL STATEMENT
7(a) / 504 LOANS AND SURETY BONDS

U.S. SMALL BUSINESS ADMINISTRATION

As of \_\_\_\_\_, \_\_\_\_\_

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or a guaranteed surety.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

Return completed form to:

For 7(a) loans: the lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty

For Surety Bonds: the Surety Company or Agent processing the application for surety bond guaranty

Name Business Phone

Home Address Home Phone

City, State, & Zip Code

Business Name of Applicant

Table with columns ASSETS and LIABILITIES. Includes rows for Cash on Hand, Savings Accounts, IRA, Accounts & Notes Receivable, Life Insurance, Stocks and Bonds, Real Estate, Automobiles, Other Personal Property, Other Assets, Accounts Payable, Notes Payable, Installment Accounts, Mortgages, Unpaid Taxes, and Total Liabilities & Net Worth.

Section 1. Source of Income. Contingent Liabilities

Table for Section 1. Source of Income and Contingent Liabilities. Rows include Salary, Net Investment Income, Real Estate Income, Other Income, As Endorser or Co-Maker, Legal Claims & Judgments, Provision for Federal Income Tax, and Other Special Debt.

Description of Other Income in Section 1.

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

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

Names and Addresses 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 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 Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
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.)

**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.)

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

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

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

**CERTIFICATION:** (to be completed by each person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan or a surety bond. I further certify that I have read the attached statements required by law and executive order.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

**NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:**

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance officer, paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.





## PROPERTY OPERATING STATEMENT

PROPERTY ADDRESS	CITY	STATE	ZIP CODE

ANNUAL INCOME	2ND YEAR PRIOR	PRIOR YEAR	CURRENT YEAR	MOS.
Rental Income Collected				
Total Income Collected				

ANNUAL EXPENSES	2ND YEAR PRIOR	PRIOR YEAR	CURRENT YEAR	MOS.
<i>Do not include one time capital expense items</i>				
Real Estate Taxes				
Insurance				
<b>UTILITIES</b>				
Gas				
Electricity				
Water/Sewer				
Trash				
<b>MAINTENANCE</b>				
Pest Control				
Gardener				
Pool Service				
Elevator				
Cleaning Service				
Building Rep. & Maint.				
Painting & Decorating				
Supplies				
<b>ADMINISTRATION</b>				
Administrative				
Advertising				
Telephone				
<b>MISCELLANEOUS</b>				
Resident Manager				
Security				
Off-Site Management				
Other				
<b>TOTAL EXPENSES</b>				
<b>NET OPERATING INCOME</b>				

COMMENTS OR EXPLANATIONS