

COMMERCIAL MORTGAGE YES

www.CommercialMortgageYes.com

LOAN APPLICATION

Phone Number: (718) 252-5796

Fax Number: (718) 504-6203

Fax Number: (561) 423-2823

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Loan Amount Requested \$ _____ **Purpose:** Purchase Rehabilitation Other

Applicant Information

Applicant _____ Address _____ City _____ County _____ State _____ Zip _____ Telephone Number Home _____ Office _____ Fax Number _____	Co-Applicant _____ Address _____ City _____ County _____ State _____ Zip _____ Telephone Number Home _____ Office _____ Fax Number _____
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If Applicant is a Corporation or Partnership - List all stockholders or general partners and their percentage of interest below.

Name _____ Stockholder # of shares _____ General Partner _____ %

For Profit Corporation Not-For-Profit Corporation Partnership Sole Proprietor

Building Information

Address _____ City _____ State _____ Zip _____

Section: _____ Block: _____ Lot: _____ County _____

Property Type Residential Commercial Mixed Use

Number of Floors Above Basement/Grade _____	Number of Residential Units _____	Number of Vacant Units _____	Residential Square Feet _____
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Number of Studio Apartments _____	Number of One Bedroom Apts. _____	Number of Two Bedroom Apts. _____	Number of Three Bedroom Apts. _____
Number of Other Apartments _____	Number of Parking Spaces _____	Number of Commercial Units _____	Total Commercial Square Feet _____

Types of Commercial Businesses _____ Elevator Yes No Number of Elevators _____

Basement <input type="checkbox"/> Yes <input type="checkbox"/> No	Year Constructed _____	Type of Construction <input type="checkbox"/> Brick Joist <input type="checkbox"/> Wood Frame <input type="checkbox"/> Fireproof <input type="checkbox"/> Other (Please Specify)
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Date of Purchase _____	How was property acquired? <input type="checkbox"/> Purchase <input type="checkbox"/> Foreclosure <input type="checkbox"/> Other (Please Specify)
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Total Purchase Price \$ _____	Total Current Mortgage \$ _____	Dimensions Size of Building _____ X _____ on Plot _____ X _____ Number of Acres _____
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AN AUDITED STATEMENT MAY BE SUBMITTED IN LIEU OF THIS STATEMENT. PLEASE ATTACH IF AVAILABLE.

Financial Statement			
	ASSETS		LIABILITIES
CASH	\$ _____		NOTES PAYABLE TO BANKS
			\$ _____
REAL ESTATE	\$ _____		
MORTGAGES OWNED	\$ _____		NOTES PAYABLE TO OTHERS
	\$ _____		\$ _____
	\$ _____		MORTGAGES ON REAL ESTATE
			\$ _____
SECURITIES	\$ _____		OTHER LIABILITIES
	\$ _____		\$ _____
	\$ _____		\$ _____
CASH VALUE OF LIFE INSURANCE	\$ _____		\$ _____
			\$ _____
OTHER ASSETS	\$ _____		\$ _____
	\$ _____		TOTAL LIABILITIES
			\$ _____
TOTAL ASSETS	\$ _____		NET WORTH
			\$ _____

Bank References			
Commercial Bank			
INSTITUTION: _____		ADDRESS _____	
ACCOUNT REPRESENTATIVE _____		ACCOUNT # _____	PHONE _____
References (include 3 business references)			
Name	Address	Phone	Relationship

Declarations
Are you a defendant in any lawsuits or legal action? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain (attach sheet if necessary)
Have you ever declared bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain (attach sheet if necessary)
Do you have any contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain (attach sheet if necessary)

Personal Data	
EMPLOYER _____	EMPLOYER ADDRESS _____
POSITION (TITLE) _____	_____
ANNUAL SALARY _____	WORK PHONE _____
OTHER INCOME \$ _____	SOURCE OF OTHER INCOME _____

Certification

The Undersigned certify the following:

1. I/We have applied for a mortgage loan from Broker / Lender. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that Lender reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information provided on the application with the employee and/or the financial institution.
3. 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, as applicable under the provisions of Title 18, United States Codes, Section 1014.
4. This application shall remain the property of Lender.
5. Prior to closing the loan, the applicant(s) agree(s) to promptly advise Lender of any change contained in this application.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a mortgage from The Broker or Lender. As part of the application process, The Broker or 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 as part of its quality control program.
2. I/We authorize you to provide to The Broker or Lender, and to any investor to whom The Lender may sell my mortgage, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. Broker, Lender, or any investor that purchases the mortgage may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to Broker, Lender, or the investor that purchased the mortgage is appreciated.

(Applicant ' s Signature)

(Social Security Number)

(Applicant ' s Signature)

(Social Security Number)

SCHEDULE A

Rent Roll Summary								
For Month of _____ Year _____ Building Address _____								

Tenant 's Name	Apt. No.	No. of Rooms*	Current Monthly Rent	Lease Expiration Date	Occupied or Vacant	Tenant Share Amount	Rent Controlled Amount	Rent Stabilized Amount
Totals								

Commercial Space	Vacant - Yes or No (indicate number of months)	Rental Amount (Monthly)	Floor No.	Square Footage of Commercial Unit	Lease Expiration Date
Totals					

*Number of rooms
 2 rooms = studio/0 bedrooms
 3 rooms = 1 bedroom
 4 rooms = 2 bedrooms
 5 rooms = 3 bedrooms
 6 rooms = 4 bedrooms

SCHEDULE B

Annual Income and Expenses

Building Address _____

	To be completed by borrower			For Lender Use Only	
	Previous Years (__ to __)	Previous Years (__ to __)	Current Year (__ to __)	Lender Standard	Final Projection
INCOME					
1. Gross income from apartment rental	_____	_____	_____	_____	_____
2. Gross income from commercial rent	_____	_____	_____	_____	_____
3. Total gross income (lines 1 plus 2)	_____	_____	_____	_____	_____
4. Collection losses					
Residential	_____	_____	_____	_____	_____
Commercial	_____	_____	_____	_____	_____
5. Effective Gross Income (line 3 less line 4)	_____	_____	_____	_____	_____
EXPENSES					
1. Real estate taxes	_____	_____	_____	_____	_____
2. Water and sewer charges	_____	_____	_____	_____	_____
3. Fire Insurance					
Premium	_____	_____	_____	_____	_____
Amount of coverage	_____	_____	_____	_____	_____
4. Liability insurance					
Premium	_____	_____	_____	_____	_____
Amount of coverage	_____	_____	_____	_____	_____
5. Licenses	_____	_____	_____	_____	_____
6. Fuel (No. __ Oil) gallons per annum	_____	_____	_____	_____	_____
7. Gas	_____	_____	_____	_____	_____
8. Electricity (not metered to tenants)	_____	_____	_____	_____	_____
9. Trash removal	_____	_____	_____	_____	_____
10. Pest control	_____	_____	_____	_____	_____
11. Maintenance and repairs	_____	_____	_____	_____	_____
12. Cleaning expenses	_____	_____	_____	_____	_____
13. Supplies	_____	_____	_____	_____	_____
14. Elevator maintenance and repair contract	_____	_____	_____	_____	_____
15. Management	_____	_____	_____	_____	_____
16. Superintendent and staff salaries					
Does superintendent receive free apt? (Y/N)					
Super 's: __ full-time __ part-time	_____	_____	_____	_____	_____
Porter 's: __ full-time __ part-time	_____	_____	_____	_____	_____
Handymen: __ full-time __ part-time	_____	_____	_____	_____	_____
17. Payroll taxes	_____	_____	_____	_____	_____
18. Legal	_____	_____	_____	_____	_____
19. Accounting and auditing	_____	_____	_____	_____	_____
20. Replacement (does not include repair)					
Ranges and refrigerators	_____	_____	_____	_____	_____
Boilers	_____	_____	_____	_____	_____
Roof	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____
21. Painting	_____	_____	_____	_____	_____
22. Other expenses	_____	_____	_____	_____	_____
TOTAL EXPENSE	_____	_____	_____	_____	_____

Applicant 's Signature _____ Date _____

Mortgage officer should note in column where final projection differs from standard and provide explanatory notes on a separate sheet