

BUSINESS PURPOSE LOAN APPLICATION

		Property	Informa	tion		
	SUBJECT PROPERT	Y ADDRESS			OPERTY DESCR	IPTION
				Property Type:		Occupancy: Owner
					☐ Apartments/Duplex	☐ Tenant
Street Address				☐ New Constru	-	☐ Other:
	CA			☐ Mobile Home Permanent Four		
City	State	Zip		Date Purchased:	: Purchase F	Price:
•		·			Owner's Est. Value:	
		PURPOS	E OF LO	AN		
Loan Amo	ount Requested					
		COMPLETE IF	CONSTR			
Year Acquired Lot	Original Cost Ar	nount of Existing Liens	(a) Present \	/alue of Lot (b)	Cost of Improvements	Total (a+b)
	BORROWER		Ψ		-BORROWER	Ψ
Last	First	Middle	Last		First	Middle
	D.O.B.				D.O.B.	
		<u> </u>			<u> </u>	
Marital Status:	☐ Married ☐ Sepa☐ Unmarried (inc. single, c		Marital Sta	atus: 🔲 Marrio	ed Separated arried (inc. single, divorce	
	Onmained (iiie. sirigie, e	iivoroca, widowca)			arried (inc. single, divorce	a, widowca)
Physical Addre	ss (no P.O. Box)		Physical A	ddress (no P.C	D. Box)	
	·					
City	State	Zip	City	,	State	Zip
Home Phone	()		Home Pho	\/	·	
Mobile Phone	()		Mobile Pho	\/	·	
Bus. Phone	(Bus. Phon	\ <u></u> ,	·	
Email Address			Email Add	ress		
		Self employed			Se	elf employed
Occupation/Pos	sition		Occupatio	n/Position		
Current Employ	/er	Yrs. on Job	Current Er	mployer		Yrs. on Job
<u> </u>	, F		<u> </u>			
Street Address of Employer			Street Add	Iress of Employ	yer	
City	State	Zip	City		State	 Zip
City	Olaic	ک اہ	Oity		Glate	د الا



INCOME (mon	thly)		Amo	unts		H	OUSING EXPEN	SES	(monthly)
Sources				Borrower	Combined Expenses			Amount	
Base Employee Income						First M	ortgage (P&I)		
<u>Overtime</u>						Other F	Financing (P&I)		
Commissions / Bo	nuses					Hazard	Insurance		
Dividends / Interes							state Taxes		
Net Rental Income							ge Insurance		
Other (please desc	· .						=		
Total Monthly Inc							state Taxes		
Please Describe "Ot	her" Income					Rent			
				-			Food, Auto		
-	.			-		Total N	Monthly Expenses		
		EVIC	TING MO	DTC	ACE INICO	DMAT	ION		
NAME OF FIRST			STING MO Phone	K I G			ION ID MORTGAGE	Phor	20
TVAINE OF TIROT	MORTGAGE	-+	TIONE		None	OLOGIN	ID MORTOAGE	1 1101	ie –
Principal Balance	Interest Rate		Regular Pay	ment	Principal B	Balance	Interest Rate	Re	egular Payment
Dalailo	□Fixed □ARM				\$		□Fixed □ARM %	\$	
Loan Number	Impound Accou		Loan Cu	rrent	Loan Nu	mber	Impound Accou	nt	Loan Current
	□Taxes □Ins. □ \$ \$	Both	□Yes [□No			□Taxes □Ins. □ \$\$\$	Both	□Yes □No
Estimated Amount	to Pay Off: \$				Estimated	Amount	to Pay Off: \$		
		(COMPLETE	IF LO	AN IS DELIN	IQUENT	Ī		
E	st. Amount to bring C		nt				Reason for Delinque	ency	
1 st TD: \$	2 nd T	D: \$							
HOME	OWNER'S INSU	RAN	ICE AND	HOM	EOWNER	S ASS	OCIATION INFO	RMA	TION
	INSURANCE COMP	ANY				HON	MEOWNERS ASSO	CIATIO	ON
				=					
COMPANY/AGENT					ASSOCIATIO				
Phone: ()	=			_) .			
Fax: ()_	<u>-</u>	D	ANIV ACC	OLIN	Fax: (_	A TIO	<u>-</u>		
		D	ANK ACC	OUN					
Bank Name:									
Type of Account:	Bala	nce S	\$		Type of Ac	count:	Bala	nce \$	
Account Number:				Account N	umber:				
Bank Name:			Bank Nam	e:					
Type of Account:	Bala	nce S	\$		Type of Ac	count:	Bala	nce \$	
Total Liquid Asse	ets: \$								



MONTHLY EXPENSES/LIABILITIES						
See attached credit report. I hereby giv Please list all liabilities if no credit report is						
LIABILITIES	allacheu. L	ist arry addition		BALANCE	MONTHLY PAYMENT	
Name and Address of the Company			OIN 7 (IE	B) (E) (IVOE	WONTHE	1 /(TIVILITY
Account No	To be paid :	through escro	Additional	Notes:		
	110 bo pala	amough occio				
	Auto Loan				1	
LIABILITIES			UNPAID	BALANCE	MONTHLY PAYMENT	
Name and Address of the Company						
			Additional	Notes:		
Account No To be p	aid through	escrow				
☐Credit Card ☐Mortgage Loan ☐]Auto Loan					
LIABILITIES			UNPAID	BALANCE	MONTHLY	PAYMENT
Name and Address of the Company						
-						
Account No	aid through	escrow	Additional	Notes:		
	_					
☐Credit Card ☐Mortgage Loan ☐]Auto Loan					
			l			
SCHEDULE OF REAL ES	TATE OW	NED (contin	ue on Continua	ation Sheet at	end if neede	d)
	Type of	Year	Present	Amount of	Gross	Mortgage
Property Address	Property	Acquired	Market Value	Mortgage & Liens	Rental Income	Payments
1.			\$	\$	\$	\$
2.			\$	\$	\$	\$
3.			\$	\$	\$	\$
4.			\$	\$	\$	\$
5.			\$	\$	\$	\$
6.			\$	\$	\$	\$
7.			\$	\$	\$	\$
		-				
		Totals:	\$	\$	\$	\$



	DECLARATIO	NS				
If you answer yes for any of the questions from 3 through 9, please use the continuation sheet for an explanation.			Borrower	Co-Borrower		
1. I (we) live in the property being pledged for the subject loan.			Yes 🗌 No	☐ Yes ☐ No		
2. Are you a U.S. citizen?] Yes □ No	☐ Yes ☐ No		
3. Have you filed for bankruptcy in the past 12 months?			Yes 🗌 No	☐ Yes ☐ No		
If yes, what type of bankruptcy wa	s filed?		Chapter	Chapter		
		☐7 ☐11 ☐13		☐ 7 ☐ 11 ☐ 13		
Approximate date of filing:						
County where filed:						
Are you obligated to pay alimony, of maintenance?	child support, or separate	 ☐ Yes ☐ No		☐ Yes ☐ No		
5. Are there currently any judgments you own?	against you or a property	 □ Yes □ No		☐ Yes ☐ No		
6. Do you have any IRS liens?			Yes No	☐ Yes ☐ No		
7. Do you have any state liens?			Yes No	☐ Yes ☐ No		
Have you had a property foreclose in lieu thereof in the last 5 year	d upon, given title, or deed	☐ Yes ☐ No		☐ Yes ☐ No		
9. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or]Yes □ No	☐ Yes ☐ No		
loan guarantee?	CINIANIOIAL OTATEMEN	T OLUM	<u> </u>	☐ 163 ☐ NO		
	FINANCIAL STATEMEN cribe/Explain EST. CASH		IWAK Y			
CASH (ON HAND & BANKS)	VALUE		TOTAL ASSETS	¢		
NOTE RECEIVABLE			TOTAL ACCETO	<u> </u>		
TRUST DEEDS &			TOTAL LIABILIT	TIES \$		
CONTRACTS	<u> </u>			·		
FURNITURE	\$		NET WORTH	\$		
REAL ESTATE TOTAL	<u> </u>	\$ (Total assets le		s total liabilities)		
(from Schedule of Real Estate)		,		,		
AUTOMOBILES (Year & Model)	<u>\$</u>		Additional Notes:	:		
STOCKS & BONDS						
OTHER ASSETS	\$					
ne undersigned does hereby authorize you to negotiate a Trust Deed loan and further authorizes you to obtain your normal credit formation verifications with respect to the accounts of the undersigned and use the information contained herein for procuring the an. I/We fully understand that it is a Federal Crime punishable by fine or imprisonment, or both, to knowingly make any false attements concerning any of the above facts as applicable under the provisions of Title 18, United Stated Code, Section 1001, et s						
Borrower/Applicant Signature	Date	Co-Bo	rrower/Applicant Sig	nature Date		
To be completed by Loan Originator:	This information was pr ☐ By applican			terview Telephone ant via e-mail or internet		
Loan Originators Signature			Date			
Loan Originator's Name (print or type) Robert B. Austin	Loan Originator Identification 376991	er	Loan Originator's Phone Number			
Loan Origination Company's Name Crawford Real Estate Services, Inc	Loan Origination Company Ide 318541	entifier				



CC	INTINUATION SHEE	T (ADDENDUM 1)	
Use this continuation sheet if	f you need more space to	complete the application. Please in	nclude any
<u>additiona</u>	al notes or information that	t you feel we should have.	
ully understand that it is a Federal nents concerning any of the above et seq.	crime punishable by fine e facts as applicable unde	or imprisonment, or both, to knowing the provisions of Title 18, United St	gly make any f ates Code, Sec
Borrower/Applicant Signature	Date	Co-Borrower/Applicant Signature	Date
0.5	5 - /-		
S Forms – LoanApp	Page 5 of 5	Initials	