



		PERSONAL	INFORMATION		
Applicant Name:			Applicant Name:		
Applicant Address:			Applicant Address:		
City			City		
St	Zip		St		Zip
Phone #			Phone #		
Fax#			Fax #		
Work/Cell:			Work/Cell:		
			Marital Status:	Mauri	ad Hamanniad
Marital Status:	Married	Unmarried	L	Marri	ed Unmarried
Lean American			<b>D FINANCING</b> Purchase	. $\square$	Refinance:
Loan Amount		Purpose:	Construction		Rehab:
Term:	15 yr 20 yr	25 yr	Rate Program: Type: (Circle One)	Adjustable: 2 yr, 5 yr, 10	Fixed:
Title will be held in wha	t name(s)	_			
1		2		3	
	FOR REFINANCES			FOR PURCHAS	SES
Date of Purchase	\$		Purchase Contract Expir	res	
Purchase Price	\$		Purchase Price	\$	
Cost of Improvements	\$		Other Financing	\$	
Pay-Off Mortgage 1	\$		Down Payment	\$	%
Pay-Off Mortgage 2			Seller Finance	\$	
Pay-Off Other					%
Maturity Date	<u>-</u>			L	
Next Due Date	-				
Current Monthly Payme	ent: \$				
, ,	<u>-</u>	COLLATARAL	. INFORMATION		
Cubiast Address		COLLATAKAL			
Subject Address:			Property Type:	. —	National Line .
City			Multi-Family	·	Mixed Use
St	Zip		Self Storage	<u> </u>	Retail
Estimated Value of Real	_ <del></del>		Office		Warehouse
Owner Occupied	Yes No		Mobile Home Parl		ight Industrial
Number of Units:		Sq. Feet:		<del>-</del> .	d & Breakfast
If Mixed Use:	Number of Res. Units		Total Rent	\$	•
	Number of Comm. Units		Total Rent	\$	
How will the property b	_	Self Managed		Management	Company
If self-managed, do you	currently manage other p	properties? Y	N	How many?	Properties
If rental property, pleas	e complete. Otherwise lea	ave A-D blank:			Units
A.) Gross Annual Income f	rom subject property:	\$		How long?	YearsMonths
B.) Gross Annual Expenses (DO NOT include mortgage paymen		\$	<u> </u>		
C.) Net Operating Income		\$	<u></u>		
D.) Gross rent of largest ter	nant	\$	<u></u>		
		EMPLOYMEN	T INFORMATION		
Applicant			Applicant		
Employer Address			Employer Address		
City	ST Zip		City	ST	Zip
Self Employed? Y	N 2.1p		Self Employed? Y	N	<u>=-r</u>
Position/Title	•		Position/Title	.,	
Type of Business			Type of Business		
Years on the job			Years on the job		
Years in this line of worl	<del></del>		Years in this line of wor		

	MON	ITHLY INCOME	E AND COMBINED	D HOUSING EXPENSE	E INFO	RMATI	ON			
Gross Monthly Income	Applicant	Spouse/Co-App	olicant	Primary Residence		Own		Rent	# Yrs_	
A. Base Employment	\$	\$	=	A. Rent				\$		
B. Overtime	\$	\$	-	B. First Mortgage (	P&I)			\$		
C. Bonuses	\$	\$	=	C. Other Financing				\$		
D. Commission	\$	\$	=	D. Hazard Insuranc				\$		
E. Dividends	\$	\$	-	E. Real Estate Taxe				Ś		
F. Net Rental	\$	\$	-	F. Mortgage Insura				Ś		
G. Other Income	Ś	\$	-	G. Homeowners As		lues		\$		
Total:		Ś	-	H. Other				Ś		
	<del>-</del>	•	=		Total:			\$		
					· Otai.			<u> </u>		
Fig. and all to attract and			PERSONA	AL ASSETS	N.I.	D -		ć		
Financial Institution				Joint Account Y			alance:			
Financial Institution				Joint Account Y	N		alance:			
Financial Institution				Joint Account Y	N		alance:			
Financial Institution				Joint Account Y	N		alance:			
Stocks and Bonds							alance:			
Other Assets (Itemize)			_			Ва	alance:	<u> </u>		
			OTHER REAL E	STATE OWNED						
			GROSS							
		PROPERTY	MONTHLY	MONTHLY INS.						rgage
ADDRESS		TYPE	RENTAL INCOME	TAXES/EXPENSES	;	MONT	HLY M	ORTGAGE PI	MT BAL	ANCE
			Ś			Ś			Ś	
			,			,			, ¢	
			\$			\$			>	
			\$			\$			\$	
			\$			\$			\$	
			<b>BUSINESS IN</b>	IFORMATION						
Business Name			BUSINESS IN	IFORMATION  Tax Identification N	Numbe	er				
Business Name Address			BUSINESS IN							
			BUSINESS IN	Tax Identification N						
Address		Zip	BUSINESS IN	Tax Identification N Occupational Licen	ıse Typ					
Address City	%	-	BUSINESS IN	Tax Identification N Occupational Licen License Number	ıse Typ			LP/LLP	s corp	
Address City St Yrs. Business Owned		Owned by G	Guarantor%	Tax Identification N Occupational Licen License Number Date Business Forn Borrower Type	ise Typ	LLC CORP		INDIVIDUA		
Address City St Yrs. Business Owned Any individual who owns 1	0% or more of th	Owned by G	Guarantor% quired to be a guar	Tax Identification N Occupational Licen License Number Date Business Forn Borrower Type	ise Typ	LLC CORP		INDIVIDUA		
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Creditor Name			Balance \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$	onthly	y Paym	ient	
		Tota	al: \$	\$				
		PERSON	AL DECLARATIONS					
				(	auara	ntor	Spot	ıse
Are there any outstandir	ng judgments a	gainst you?			Υ	N	Υ	N
Have you declared bankı	uptcy in the p	ast 7 years?			Υ	Ν	Υ	N
Have you had property f	oreclosed upo	n or given the title or deed	d in lieu thereof in the last 7 ye	ears?	Υ	N	Υ	N
Are you party to a lawsu	it?				Υ	N	Υ	N
		•	resulted in foreclosure or judg t or any other loan, mortgage,		Υ	N	Υ	N
obligation, bond or loan?		iciaali oli aliy icaciai acb	tor any other loan, mortgage,	inianciai	Υ	N	Υ	N
-		support or separate mair	ntenance?		Υ	N	Y	N
Is any part of the down p					Υ	N	Y	N
	•	he property as your prima	arv residence?		Υ	N	Y	N
Are you a US Citizen?	a to occupy t	e property as year prime	,		Y	N	<u>.</u> Ү	N
Are you a permanent res	ident alien?				Y	N	<u>.</u> У	N
Please provide Visa Statu								
riedse provide visa state	з п аррпсавіс		SS DECLARATIONS					
Has your husiness or any	nrincinal of v		kruptcy in the past 7 years?		Υ	N	Υ	N
		r business party to a laws			<u>.</u> Ү	N	<u>.</u> Ү	N
Has your business ever d		' '			Υ	N	Υ	N
Has any principal of your	business had	property foreclosed upon	within the past 7 years?		Υ	N	Υ	N
		al license revoked within			Υ	N	Υ	N
If you answered yes to a	ny of the abov	e statements, please expl	ain:					
Applicant Signature	Date	Social Security Number	Date of Birth	]				
	<u> </u>		1	7				
Co-Applicant Signature	Date	Social Security Number	Date of Birth	-				
		•	L AUTHORIZATION					
I hereby authorize Conne	er Affiliates, In		TD to verify my past and prese	nt employment, e	arnin	g reco	rds,	

I hereby authorize Conner Affiliates, Inc. and Conner Affiliates, LTD to verify my past and present employment, earning records bank accounts, stock holdings, credit reports and any other third party verifications needed to process my loan application. I further authorize Conner Affiliates Inc., and Conner Affiliates, LTD 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.

Applicant Signature	Date	Social Security Number	Date of Birth
Co-Applicant Signature	Date	Social Security Number	Date of Birth