

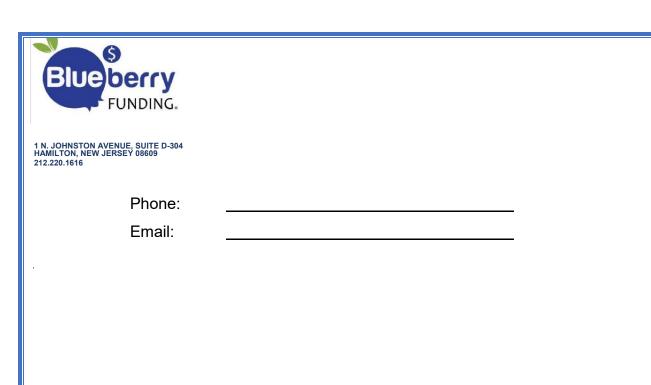
	Date:	
Loan Amount:		
Collateral Property Address:		
Lender's Name:		
Lender's Entity Type:		-
Lender's State of Formation:		
Lender's Address:		
Borrower's Name:		
Borrower's Email Address:		
Borrower's Personal Number:	_	
Borrower's Entity Type:		
Borrower's State of Formation:		
Borrower's Address:		
Name / Title of Signatory:		
Name / Title of Signatory:		
Is a Power of Attorney being used? And, if so, by who	m:	



1 st Guarantor's Name:	
1 st Guarantor's Address:	
Tentative Date of Closing:	
Please attach a picture of the Collateral.	
2 nd Guarantor's Name:	
2 nd Guarantor's Address:	
•	
Loan Term:	
Payment due on the 1 st of each Month.	
Date of 1 st Payment (MM/DD/YY):	
Maturity Date (MM/DD/YY):	
Maturity Date (MM/DD/YY): Last Day to Draw (MM/DD/YY):	
Last Day to Draw (MM/DD/YY):	
Last Day to Draw (MM/DD/YY):	
Last Day to Draw (MM/DD/YY): Purpose of Loan:	
Last Day to Draw (MM/DD/YY): Purpose of Loan: Contract Purchase Price:	
Last Day to Draw (MM/DD/YY): Purpose of Loan: Contract Purchase Price: Loan Amount:	



Legal Fee to Lender's Cou	ınsel:	
Default Rate:		
Highest Allowed by State:		
Grace Period:		
Late Fee:		
Prepayment Date (MM/DD)/YY):	
How many months for ex	ctension:	
_		
Title Company Contact Inf	ormation:	
	Phone:	 -
	Name:	 -
Escrow Company Contact	Information: _	
	Phone:	.
	Name:	 -
Attorney Contact Name:		



There is a separate attachment to this Loan Application which confirms my / our consent to having a Credit Report obtained on the signatory(ies) below. If for some reason the Consumer Credit and Background Report Release Form is not attached, I hereby confirm my consent to same by my signature below.

Printed Name	Signature	
Printed Name	Signature	

CONSUMER CREDIT and BACKGROUND REPORT RELEASE FORM *PLEASE READ CAREFULLY*

BY MY SIGNATURE BELOW I AUTHORIZE ______ to obtain a Consumer Credit Report and/or a Background Screening Report on me. This Authorization is valid for purposes of verifying information given pursuant to employment, leasing, rental, business negotiations, or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA).

The Background Screening Report may contain information available in the Public Domain but may not include interviews with persons other than previous employers or their agents.

By my signature below, I hereby authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies,



military services,	and persons to re	lease all i	nformation	they may	have about	me including	criminal	and
driving history. The	nis authorization s	hall be va	alid in origin	al or copy	/ form.			

Applicant's Name:		
Social Security Number:		
Date of Birth:		
Current Street Address:		
City / State / Zip Code:		
Drivers License Number:	State:	
Signature:		
Date:		

NOTE: PLEASE INCLUDE A COPY OF A VALID DRIVERS LICENSE