

# National Commercial Property Loans Inc.

## **Items required for initial Commercial Loan Evaluation- (Purchase)**

**Go to Web Page for Copies of Application and Forms:**

**<http://www.dcmonline.net/applications.html>**

- 1003 Application or Commercial Application (attached)
- Principal Borrower Information & Resume (*pages 1-2*)
- Certification and Authorization Form (*see page 3*)
- Personal Financial Statements (*see pages 4-5*)
- Current Rent Roll for subject property **provided by Seller** (*see page 6*)
- Schedule of Real Estate Owned by borrower (*form can be down loaded on web page*)
- Subject property Income tax returns for previous 3 years (**if available**) and year to date Income / Expense Report **provided by Seller** (*see page 7*)
  - *If 3 years income tax is not available initially, provide previous year and current year to date Income / Expense Report*
- Photo's of property (*if available*)
- Copy of Purchase Contract (*if applicable for purchases only*)
- Credit Report (*can be ordered by lender*)

## **Other Required Documents that may trail the above documents:**

- Borrowers Personal Income Tax Returns for previous 3 years and/or current pay stubs or Balance Sheet (*not required for stated income*)
- Borrowers Business Income Tax Reports for past 3 years and year to date Balance Sheet and Income/Expenses. (*not required for stated income program*)

**\*\*Applications that contain all required information will be given priority\*\***

**Complete the above forms and forward to:**

**National Commercial Property Loans Inc.**

**Fax: 866-257-9609**

**[email to::johnc@ncploans.com](mailto:johnc@ncploans.com)**

**[Web Page](#)**

**972-458-7781 office**

## PRINCIPAL / BORROWER(s) INFORMATION FORMS

(Please list information on all company principals, owners and loan guarantors. Anyone who co-signs for the loan or owns more than 20 percent of stock in the operating company should be listed as a principal. Make additional copies of this blank form if necessary).

### Principal 1

First Name:	<b>Full</b> Middle Name:	Last Name:
Aliases or maiden names <b>(If known by more than one name, please give dates)</b>		
1 _____	From: (Mo/Yr)	To: (Mo/Yr)
2 _____	From: (Mo/Yr)	To: (Mo/Yr)
Title:		
Ownership Percentage:	Date of Birth:	
Place of Birth:	Social Security Number:	
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, provide resident alien number and a copy of front and back of resident alien card _____	Home Telephone Number:	
Home Address:	From: (Mo./Yr.)	To: (Mo./Yr.)
City:	State:	Zip Code:
Prior Home Address <b>(if fewer than 3 years at above):</b>	From: (Mo./Yr.)	To: (Mo./Yr.)
City:	State:	Zip Code:

# MANAGEMENT RESUME

Please fill in all spaces. If an item is not applicable, please indicate such. If you would like to submit a different version of your resume, please do so. You may include additional relevant information on a separate exhibit.

## Personal information:

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Residence Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Residence Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Present Date.

Previous Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Are you employed by the U.S. Government?  Yes  No Agency/Position: \_\_\_\_\_

Are you a U.S. citizen?  Yes  No If no, give Alien Registration Number: \_\_\_\_\_

## Education:

High School/College/Technical Name/Location	Dates Attended	Major	Degree/Certificate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Military Service Background:

Branch of Service: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

## Work Experience: List chronologically, starting with present employment.

Company Name/Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_

Company Name/Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_

Company Name/Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to National Commercial Property Loans Inc. and/or assigns and any and all information Lender and/or assigns may require at any time for any purpose related to our credit application and/or loan transaction with Lender and/or assigns.

I/We hereby authorize National Commercial Property Loans Inc. to release any and all information and/or data (including but not limited to personal and/or business financial statements, personal and/or business income tax returns, payment and/or credit history) to any entity National Commercial Property Loans Inc. deems necessary for any purpose related to our credit application/loan transaction with National Commercial Property Loans Inc. and/or assigns.

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

## PERSONAL FINANCIAL STATEMENT BORROWER(S)

AS OF \_\_\_\_\_

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Residence Phone: \_\_\_\_\_

City, State, & Zip Code: \_\_\_\_\_

Business Name or Applicant/Borrower: \_\_\_\_\_

ASSETS		(Omit Cents)	LIABILITIES		(Omit Cents)
Cash on hand & in Banks.....	\$	_____	Account Payable.....	\$	_____
Savings Accounts.....	\$	_____	Notes Payable to Banks and Others.....	\$	_____
IRA or Other Retirement Account.....	\$	_____	(Describe in Section 2)		
Accounts & Notes Receivable.....	\$	_____	Installment Account (Auto).....	\$	_____
Life Insurance-Cash Surrender Value Only.....	\$	_____	Mo. Payments \$ _____		
(Complete Section 8)			Installment Account (Other).....	\$	_____
Stocks and Bonds.....	\$	_____	Mo. Payments \$ _____		
(Describe in Section 3)			Loan on Life Insurance.....	\$	_____
Real Estate.....	\$	_____	Mortgages on Real Estate.....	\$	_____
(Describe in Section 4)			(Describe in Section 4)		
Automobile-Present Value.....	\$	_____	Unpaid Taxes.....	\$	_____
Other Personal Property.....	\$	_____	(Describe in Section 6)		
(Describe in Section 5)			Other Liabilities.....	\$	_____
Other Assets.....	\$	_____	(Describe in Section 7)		
(Describe in Section 5)			<b>Total</b> .....	\$	_____
<b>Total</b>	\$	_____	Net Worth (Assets minus Liabilities).....	\$	_____

### Section 1. Source of Income

Salary.....	\$	_____
Net Investment Income.....	\$	_____
Real Estate Income.....	\$	_____
Other Income (Describe below)*.....	\$	_____

Description of Other Income in Section 1.

### Contingent Liabilities

As Endorser or Co-Maker.....	\$	_____
Legal Claims & Judgments.....	\$	_____
Provision for Federal Income Tax.....	\$	_____
Other Special Debt.....	\$	_____

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

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

Name and Address of Note holder(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 a 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 Property			
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 Lender and/or assigns to make inquires as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

<b>Signature:</b>	<b>Date:</b>	<b>Social Security Number:</b>
<b>Signature:</b>	<b>Date:</b>	<b>Social Security Number:</b>



# **INCOME / EXPENSE REPORT**

Property Name: \_\_\_\_\_ Property Type: \_\_\_\_\_  
 Property Address: \_\_\_\_\_ City, State Zip: \_\_\_\_\_

<u><b>ANNUAL INCOME</b></u>	<b>Year Before Last</b>	<b>Last Year</b>	<b>Year to date 1/1 To /20</b>
Actual Rent Collected			
Laundry Income			
Reimbursement Income			
Late Fees			
Miscellaneous Income			
<b>TOTAL INCOME COLLECTED</b>			
<b>FIXED ANNUAL EXPENSES</b>			
Real Estate Taxes			
Other Taxes and Assessments			
Insurance			
Licenses			
Other			
<b>OPERATIONAL EXPENSES</b>			
Fuel/Gas			
Electricity			
Water and Sewer			
Trash and Snow Removal			
Pest Control			
Building Maintenance & Repairs			
Cleaning Expenses			
Supplies			
Off Site Management			
On Site Management			
Advertising/Telephone/Bank Charges			
Legal and Professional			
Other			
<b>REPLACEMENT RESERVES (Non-Recurring)</b>			
Carpet/Drapes/Blinds			
Appliances			
Heating/AC/Roof			
Other			
<b>TOTAL EXPENSES &amp; REPLACEMENT RESERVES</b>			

I/we fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Seller

By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Management Company