



LOAN APPLICATION

Property Name _____
Street Address _____
City, State, Zip _____

Property Type (Check All That Apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Multifamily | <input type="checkbox"/> Industrial | <input type="checkbox"/> Self Storage |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Mixed Use | <input type="checkbox"/> Health-Related/Senior Living |
| <input type="checkbox"/> Office | <input type="checkbox"/> Hotels & Motels | <input type="checkbox"/> Mobile Home Parks |
| <input type="checkbox"/> Other (Describe) _____ | | |

Percentage Owner Occupied (If Any) _____ %

Name Of Borrowing Entity Or Individual(s)

Contact Information

Borrower Contact _____	email _____	primary
Street Address _____		
City, State, Zip _____	email _____	secondary
Telephone (_____) _____		
Fax (_____) _____	email _____	other

Borrowing Entity (Check One)

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Individuals |
| <input type="checkbox"/> Trust | <input type="checkbox"/> Limited Liability Corporation |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Other (Describe) _____ |

Ownership Breakdown

Individual/Entity	Ownership Percentage
_____	_____ %
_____	_____ %
_____	_____ %

Loan Request

\$ _____ amount _____ term yrs _____ amortization yrs

Purpose Of Loan (Check One)

- | | | |
|--------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Acquisition | <input type="checkbox"/> Refinance | <input type="checkbox"/> Cash-Out Refinance |
|--------------------------------------|------------------------------------|---|

If an acquisition, what is the purchase price? \$ _____

If a refinance: What was the purchase date? _____
What was the original purchase price? \$ _____
What was the total amount of funds invested during your ownership? \$ _____
Total: \$ _____



LOAN APPLICATION
(Continued)

If This Is A Refinance, Is There Existing Debt? (Check One)

Yes No

If yes, please provide:

1st Mortgage	2nd Mortgage
Current Loan Balance: \$ _____	Current Loan Balance: \$ _____
Current Lender: _____	Current Lender: _____
Interest Rate: _____	Interest Rate: _____
Rate Type: <input type="checkbox"/> Fixed <input type="checkbox"/> Adjustable	Rate Type: <input type="checkbox"/> Fixed <input type="checkbox"/> Adjustable
Maturity Date: _____	Maturity Date: _____

Does your loan have a prepayment penalty? If so, how much is it? _____
If you are refinancing an SBA loan, is it a 504 or a 7A? 504 7a

Complete This Portion For A Multifamily Property

Apartments	Mobile Homes
Number of residential units: _____	How many spaces? _____
Number of buildings: _____	How many homes owned by borrower? _____
Year built: _____	
Condition of property: (Check One) <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor	

Complete This Portion For Commercial Property

Square footage: _____	Number of tenants: _____
Size of land: _____	Year built: _____
Do any of the tenants have an option to buy? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when and for what price? _____	

Property type: _____	
Condition of property:(Check One) <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor	

Annual Operating Expenses

Real estate taxes: \$ _____	Repairs and maintenance: \$ _____
Insurance: \$ _____	Reserves for replacements: \$ _____
Management expenses: \$ _____	Utilities: \$ _____
Other operating expenses: \$ _____	

What Do You Estimate The Value To Be? \$ _____

Please include the following with this application:

- Copies of all leases, appraisals, and environmental reports (if any).
- If building is proposed, include copy of plans, specifications, cost breakdown, and site plan.
- Photos of subject property (digital or prints).

Signature of Primary Borrower or Contact Person

Date

Toll Free 800-250-5151
 1348 West State Road, Ste. 104
 Pleasant Grove, UT 84062

**BENCHMARK
 COMMERCIAL
 FUNDING**
 SETTING THE STANDARD

Toll Free Fax 800-853-1707
 www.bmcfunding.com



CONFIDENTIAL FINANCIAL STATEMENT AS OF:

Applicant's Name (Last)	(First)	(Middle Init.)	Social Security Number	Bus TIN
Current Address	City	State	Zip	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried
Other name(s) of applicant in which credit has been granted or in which Social Security or Tax ID No. references may be verified				
Spouse's Name (Last)	(First)	(Middle Init.)	Social Security Number	

ATTACH SCHEDULES IF SPACE IS INADEQUATE

ASSETS	LIABILITIES
Cash on hand	Accounts payable (not installment)
Cash in _____ Bank	Installment accounts Monthly Payment
Cash in _____ Bank	_____ \$ _____
Cash in _____ Bank	(Item) (Creditor) \$ _____
U.S. Government Bonds	_____ \$ _____
Stocks and bonds:	_____ \$ _____
_____, _____ sh. @ \$ _____	_____ \$ _____
_____, _____ sh. @ \$ _____	Notes payable @ \$ _____ per _____
Cash value of life insurance	Accrued taxes payable
Accounts and notes receivable	Life insurance loans
Real esate owned: Monthly Income	Mortgages on real estate Monthly Payment
_____ \$ _____	_____ \$ _____
_____ address \$ _____	(Mortgagee) \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____
Mortgage and Contracts owned	_____ \$ _____
_____ \$ _____	(Mortgagee) \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____
Automobiles: make _____ yr _____	Other Debts _____
make _____ yr _____	_____
Trucks	_____
Household & personal property	_____
Other assets _____	_____

	Total Liabilities
	Net Worth
Total Assets	Total Liabilities & Net Worth

Sources of Annual Income

Salary before deductions \$ _____

Overtime, bonus or commissions _____

Professional income, net _____

Spouse's salary before deductions _____

Real estate income, net _____

Dividends, annuities, etc. _____

Other income _____

Total Annual Income \$ _____

Contingent Liabilities or others not Included Above

Are any assets pledged? _____

Are presently being sued? _____

Have you ever taken bankruptcy? _____

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Phones: Residence _____

Business _____

BENCHMARK COMMERCIAL FUNDING

COMMERCIAL INCOME & EXPENSE HISTORY

Borrower: _____

Property Address: _____

Sources of Income:	Current Year to Date		Last Year: _____		Prior Year: _____	
	From:	to:	From:	to:	From:	to:
RENTS						
CAM						
Other (Specify)						
Other (Specify)						
Total Income Collected:						
Expenses:						
Real Estate Taxes						
Fire Insurance						
Water						
Sewer						
Electricity						
Gas						
Trash						
Cable TV						
Security Services						
Accounting						
Off-site Management						
Salaries						
Security Services						
Pay-roll Taxes						
Office Expenses						
Tenant Improvements						
Maintenance/Repair						
Landscaping						
Maintenance Contracts						
Capital Improvements						
Business License						
Legal Fees						
Advertising						
Commissions						
Miscellaneous						
Other - Telephone						
Total Expenses:						

Net Operating Income:			
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I certify under penalty of perjury that the information herein is true and correct as of: _____.

Date

Applicant's Signature

Date

Seller's Signature

Date

Toll Free 800-250-5151
1348 West State Road, Ste. 104
Pleasant Grove, UT 84062

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Resume For

_____ (name)

Birth Date _____
(mm/dd/yy)

Birth Place _____
(city/state)

SSN _____

Veteran yes no

Educational Background

High School _____

College _____

Technical _____

Degrees _____

Work Experience

From _____ Title _____ Duties _____
(mm/dd/yy)

From _____ Title _____ Duties _____
(mm/dd/yy)

From _____ Title _____ Duties _____
(mm/dd/yy)

From _____ Title _____ Duties _____
(mm/dd/yy)

Signature _____ Date _____

BENCHMARK COMMERCIAL FUNDING

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

The undersigned, Applicant, has applied for a real estate loan with Benchmark Commercial Funding. You are hereby requested and authorized to release any information required by Broker to complete the processing of the loan request. Necessary credit information may include balances of savings deposits, checking accounts, mortgage loans and consumer loans plus account and loan payment history. In addition, if Broker is verifying my current or past employment, you are requested and authorized to release employment and pay data which may include my date of employment, current position or position held, probability of continued employment or reason for leaving, current or last pay and pay history, and average hours worked.

A copy of this authorization may be deemed to be the equivalent of the original and may be used as a duplicate original.

Thank You,

Applicant's signature

Social Security Number/Tax Identification Number

Applicant's signature

Social Security Number/Tax Identification Number

Applicant's Signature

Social Security Number/Tax Identification Number

Applicant's Signature

Social Security Number/Tax Identification Number

BENCHMARK COMMERCIAL FUNDING

This addendum is incorporated into and shall be deemed to amend and supplement the Financial Statement to which it is attached.
This schedule must be completed in its entirety. Any/all attachments must be signed, dated and include the information shown below.

Schedule of Real Estate Owned (Schedule 5) (Show Applicant's Percentage of Ownership Only)

Applicant's Name: _____

Applicant's signature _____ Date _____

Applicant's signature _____ Date _____

Property Address	% Owned	Property Type/ # of Units (100%)	Acquis. Date	Applicant's % of Acquisition Cost	Applicant's % of Present Market Value	Maturity Date	Applicant's % of Remaining Balance of Mortgage	Name of Lender	Loan #	(1) Applicant's % of Effective Gross Income	(2) Applicant's % of Total Operating Expenses (include taxes & ins.)	(3) Applicant's % of Annual Payments (exclude impounds)	Cash Flow (column 1 less columns 2&3)
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