



VENTURE PACIFIC
— COMMERCIAL SERVICES —

Commercial Real Estate Loan Application Check List

- Business Federal Tax Returns for the most recent 3 years
- Business Financial Statements year to date within the last 90 days
- Personal Federal Tax Returns for the most recent 3 years
- Copies of tenant leases or complete attached Rent Roll
- Purchase Agreement (for acquisition)
- Mortgage statements (for refinance)
- Pictures of subject property

Commercial Real Estate Loan Application



Notice to Individuals & Sole Proprietors: You may apply for credit in your name alone, regardless of marital status.

Credit Request			
AMOUNT REQUESTED	REQUESTED:	TERM	AMORTIZATION
PURPOSE OF REQUEST: <input type="checkbox"/> PURCHASE <input type="checkbox"/> REFINANCE <input type="checkbox"/> CASH OUT REFINANCE			
IF YOU INTEND TO APPLY FOR JOINT CREDIT, PLEASE INITIAL HERE. APPLICANT _____ CO-APPLICANT _____			

Applicant Information			
LEGAL NAME OF APPLICANT	PHONE	TAX ID NUMBER	DATE ESTABLISHED Mo. Yr.
DBA (if applicable)	NUMBER OF EMPLOYEES		TYPE OF BUSINESS
KEY CONTACT/BUSINESS TITLE OR POSITION	CONTACT PHONE	UNDER CURRENT MANAGEMENT SINCE Mo. Yr.	
STREET ADDRESS	CITY	STATE	ZIP CODE
MAILING ADDRESS (if different)	CITY	STATE	ZIP CODE
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION <input type="checkbox"/> S CORPORATION <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> GENERAL PARTNERSHIP <input type="checkbox"/> LIMITED PARTNERSHIP <input type="checkbox"/> LLC <input type="checkbox"/> TRUST <input type="checkbox"/> OTHER			

Information About Principals and Guarantors					
NAME	TITLE	TELEPHONE	SOCIAL SECURITY NUMBER	% OWNERSHIP	DRIVER'S LICENSE
STREET ADDRESS	CITY		STATE	ZIP CODE	
NAME	TITLE	TELEPHONE	SOCIAL SECURITY NUMBER	% OWNERSHIP	DRIVER'S LICENSE
STREET ADDRESS	CITY		STATE	ZIP CODE	
NAME	TITLE	TELEPHONE	SOCIAL SECURITY NUMBER	% OWNERSHIP	DRIVER'S LICENSE
STREET ADDRESS	CITY		STATE	ZIP CODE	

Applicant's Financial Relationships			
FINANCIAL INSTITUTION	ACCOUNT TYPE <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> PERSONAL <input type="checkbox"/> BUSINESS		
ACCOUNT NUMBER	CURRENT BALANCE	AVERAGE BALANCE	
FINANCIAL INSTITUTION	ACCOUNT TYPE <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> PERSONAL <input type="checkbox"/> BUSINESS		
ACCOUNT NUMBER	CURRENT BALANCE	AVERAGE BALANCE	

Current Loans/Lines (Provide details of Applicant's credit relationships)					
NAME OF CREDITOR	TYPE OF LOAN (Sec/Unsec/Equip/Etc.)	ORIGINAL AMOUNT	BALANCE OWING*	MONTHLY PAYMENT	MATURITY DATE

Commercial Real Estate Loan Application (Page 2 of 3)



Credit Request	
APPLICANT _____	
PLEASE CHECK ONE: <input type="checkbox"/> FIRST TRUST DEED <input type="checkbox"/> SECOND TRUST DEED	
PURPOSE OF REQUEST: <input type="checkbox"/> TO FINANCE CURRENT PURCHASE AT _____ <input type="checkbox"/> OTHER (describe and show amounts) _____	
<input type="checkbox"/> PROPERTY IMPROVEMENT (Amount \$ _____) <input type="checkbox"/> CARRY RECEIVABLES _____	
<input type="checkbox"/> REFINANCE PRESENT LOAN <input type="checkbox"/> PURCHASE INVENTORY _____	
<input type="checkbox"/> TAKE TRADE DISCOUNTS _____	

Property Address			
ADDRESS _____	CITY _____	STATE _____	ZIP CODE _____

Property Type								
<input type="checkbox"/> APARTMENTS	<input type="checkbox"/> MANUFACTURING	<input type="checkbox"/> MIXED USE	<input type="checkbox"/> OFFICE	<input type="checkbox"/> RETAIL	<input type="checkbox"/> WAREHOUSE	<input type="checkbox"/> OTHER		
CONSTRUCTION TYPE (i.e., wood frame, concrete tilt-up, un-reinforced brick, etc.) _____								
SQ. FT.	APPROX. LOT SIZE	# PARK SPACES	% OCC.	% OWNER OCC.	YEAR BUILT	DATE ACQUIRED	PURCHASE PRICE	ESTIMATED VALUE
						/ /		
HOW IS PROPERTY CURRENTLY VESTED? (Attach copy of property tax bill) _____								
PROPERTY IS/WILL BE HELD IN NAMES (S) OF _____					ZONING (If available) _____			
DATE LAST APPRAISED _____			APPRAISED VALUE _____		APPRAISAL COPY AVAILABLE <input type="checkbox"/> YES <input type="checkbox"/> NO			

Tenant List (Attach copy of all leases)						
OCCUPANT NAME	ASSOC. WITH APPLICANT	% OF SPACE OCCUPIED	BUSINESS ACTIVITY	ANNUAL RENT	MONTHS REMAINING ON LEASE	
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					

Annual Expense			
UTILITIES \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
MAINTENANCE \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
PROPERTY MANAGEMENT \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
REAL ESTATE TAXES \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	

Annual Expense			
INSURANCE \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
INTEREST EXPENSE \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
OTHER \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	
TOTAL \$	ACTUAL <input type="checkbox"/>	PROJECTED <input type="checkbox"/>	

Existing Liens Against the Property							
LENDER	DATE MADE	ORIGINAL AMOUNT	CURRENT BALANCE	ORIGINAL TERM	RATE (FIXED/FLOATING)	MONTHLY PAYMENT	MATURITY DATE

Commercial Real Estate Loan Application (Page 3 of 3)



Signatures and Certification of Applicants

Applicant(s) certify that the information provided on and with this form is complete and correct and that the undersigned are authorized to execute this form on behalf of Applicant(s). Applicant(s), Principals and Guarantors, authorize Venture Pacific Funding, Inc. to obtain credit reports, copies of Applicant(s) tax returns and other information from the IRS and other taxing authorities, and to take such other steps as Venture Pacific Funding, Inc. deems appropriate to verify (and from time to time re-verify) the information provided with this form. Applicant(s), Principals and Guarantors further agree to execute and deliver to Venture Pacific Funding, Inc. such other forms, and take such other action, as Venture Pacific Funding, Inc. requests in furtherance of the foregoing. Applicant(s), Principals and Guarantors authorize the Venture Pacific Funding, Inc. to release information concerning them to other creditors, guarantors, credit bureaus and credit reporters. Applicant(s), Principals and Guarantors agree to promptly notify Venture Pacific Funding, Inc. in writing of any change in name, address or location of assets of Applicant(s).

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

By signing below I/we certify that the information provided in this application is true and correct as of the date below and acknowledge the understanding that any intentional or negligent misrepresentation(s) of the information contained in the application may result in civil liability and/or criminal penalties including, by not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et. seq. and liability for monetary damages due to reliance upon any misrepresentation that has been made in this application.

REQUIRED SIGNERS:

- | | |
|---|---|
| <input type="checkbox"/> CORPORATIONS-President and one other officer | <input type="checkbox"/> PARTNERSHIP-All general partners or by partnership authorization |
| <input type="checkbox"/> SOLE PROPRIETORSHIP OR INDIVIDUAL(S)-The Owner or individual (s), (if married, may apply for a separate account) | <input type="checkbox"/> LIMITED LIABILITY COMPANY-All members or authorized manager(s) |
| <input type="checkbox"/> TRUST-All trustees | <input type="checkbox"/> GUARANTORS-All |

Applicant

APPLICANT NAME _____

By: _____

DATE: _____

Signature and Title

DATE: _____

Signature and Title

DATE: _____

Signature and Title

DATE: _____

Signature and Title

Principals and Guarantors

Signature

DATE: _____

Signature

DATE: _____

Signature

DATE: _____

Signature

DATE: _____

PERSONAL FINANCIAL STATEMENT - PG 1 of 3



You may apply for an extension of credit individually or jointly with another applicant. This statement and any applicable supporting schedules may be completed jointly by co-applicants if their assets and liabilities can be meaningfully and fairly presented on a combined basis, otherwise separate statements and schedules must be provided. If you are applying for an unsecured individual loan, you do not need to complete any information concerning a co-applicant unless another person will be permitted to use the account or you wish the co-applicant's or other person's income to be relied upon as the basis for repayment. Round all amounts to the nearest \$100.

I certify that the information provided in this statement is complete, true and correct as of the date signed. So long as I owe any sums to the Bank, I agree to give the Bank prompt written notice of any material change in my financial condition and, upon request, agree to provide the Bank with an updated personal financial statement. The Bank is authorized to retain this personal financial statement whether or not credit is approved and is further authorized to verify my credit and employment history or any other information in this statement. If credit is granted, the Bank is authorized to obtain a credit bureau report periodically. This application does not obligate the Bank to provide credit.

Applicant's Signature _____ Date _____ Co-Applicant's Signature _____ Date _____

*****Fully complete this Statement, addressing each section.*****

APPLICANT				CO-APPLICANT			
Full Name				Full Name			
Street Address				Street Address			
City/State/Zip				City/State/Zip			
Time at Address <input type="checkbox"/> Own <input type="checkbox"/> Rent Mo Payment \$				Time at Address <input type="checkbox"/> Own <input type="checkbox"/> Rent Mo Payment \$			
Previous Address				Previous Address			
City/State/Zip <input type="checkbox"/> Owned <input type="checkbox"/> Rented				City/State/Zip <input type="checkbox"/> Owned <input type="checkbox"/> Rented			
Social Security Number		Date of Birth		Social Security Number		Date of Birth	
Phone: Home		Work		Phone: Home		Work	
Employer				Employer			
Position/Title		Since		Position/Title		Since	
Previous Employer				Previous Employer			
Position/Title		How Long		Position/Title		How Long	
Marital Status * <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated				Marital Status * <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated			

* Do not provide this information if your application is for individual, unsecured credit.

ASSETS		LIABILITIES	
Cash (Schedule 1)		Short Term Notes Due Financial Institutions (Sched 7)	
Securities (Schedule 2)		Short Term Notes Due to Others (Schedule 7)	
Value of Your Ownership Interest in Business		Credit Accounts and Bills Due (Schedule 8)	
Life Insurance Cash Value (Schedule 3)		Insurance Loans (Schedule 3)	
Mortgages and Contracts Held by You (Sch 4)		Installment Loans and Contracts (Schedule 7)	
Homestead (Schedule 5)		Mortgages on Home (Schedule 5)	
Other Real Estate (Schedule 5)		Mortgages on Other Real Estate (Schedule 5)	
Profit Sharing, Pension, IRA, Otr Retirement (Sch 6)		Back Taxes Owing	
		Other Liabilities (Describe)	
Automobiles (Describe)			
Personal Property			
Other Assets (describe)			
		TOTAL	\$ -
TOTAL	\$ -	(Assets - Liabilities)	NET WORTH \$ -

*ANNUAL INCOME	Applicant	Co-Applicant	ANSWER EACH QUESTION YES OR NO	Applicant	Co-Applicant
Salary			Are you a Co-Maker, Endorser, or Guarantor of any other person's debt?		
Bonuses/Commissions			Are you a defendant in any suit or legal action?		
Dividends/Interest			Have you ever gone through bankruptcy?		
Net Real Estate Income			Have you ever had a judgement against you?		
*Income from alimony, child support, or maintenance payments need not be entered unless you want it considered as a basis for repayment.			Have you made a will?		
Other (List)					
Total	\$ -	\$ -			

SCHEDULE 1 / CASH, SAVINGS, CERTIFICATES OF DEPOSIT

Name of Bank or Financial Institution	Type of Account	Acct Balance
Total		\$ -

SCHEDULE 2 / SECURITIES OWNED

Par Value or No. of Shares	Description	Registered in Name(s) of	Listed or Unlisted	Current Market Value
Total				\$ -

SCHEDULE 3 / LIFE INSURANCE

Insurance Company	Insured	Beneficiary	Face (redeemable) Value	Cash Value of Policy (present value if policy cancelled)	Loans
Total				\$ -	\$ -

SCHEDULE 4 / RECEIVABLES DUE TO ME ON MORTGAGES AND CONTRACTS I OWN

Name of Debtor	Description of Property	First Lien or Second	Date of Maturity	Monthly Receivable	Balance Due
Total					\$ -

SCHEDULE 5 / REAL ESTATE OWNED, HOME(S) FOR YOUR OWN USE

Check box if you own investment real estate. Complete PFS Real Estate Addendum (page 3).

Property Address and Description	Year Acquired	Purchase Price	Current Market Value	Mortgage Balance	Name of Creditor	Date of Maturity	Monthly Payment
Total							\$ -

SCHEDULE 6 / PROFIT SHARING, PENSION, IRA

Name of Institution	Type of Account	Account Balance	Amount Totally Vested	Loans
Total			\$ -	\$ -

SCHEDULE 7 / INSTALLMENTS, CREDIT LINES AND NOTES

Name of Creditor	Collateral	Date of Maturity	Monthly Payment	Balance Due
Total				\$ -

SCHEDULE 8 / CREDIT ACCOUNTS, BILLS DUE, ALIMONY/CHILD SUPPORT, DAYCARE, etc.

Check box if you pay/owe alimony or child support.

Name of Company	Monthly Payment	Balance Due
Total		\$ -



Addendum to Schedule 5. Complete as many PFS Real Estate Addendums as necessary to disclose all real estate you own.

SCHEDULE 5 CONTINUED / REAL ESTATE OWNED, INVESTMENT REAL ESTATE

Property Address and Description	Property Type*	Year Acquired	Purchase Price	Current Market Value	Mortgage Balance	Name of Creditor	Maturity Date	Percent Ownership**	Monthly Rents Received	Monthly Payment
Total										

* Property types: Cmm = Commercial, SF = Single Family 1-4, 5+ = Multi-Family, O = Other

** If property is co-owned, provide names of other owners and their ownership interest.