



# COMMERCIAL LENDING

## INDIVIDUAL INFORMATION & PERSONAL FINANCIAL STATEMENT

Each individual with 20% or greater interest in the borrowing entity, complete this form and a Schedule of Real Estate Owned, if applicable.

### I. INDIVIDUAL INFORMATION

Name _____	Spouse _____		
SSN _____	SSN _____		
Phone _____	Phone _____		
Email _____	Email _____		
Street Address _____			
City, State and Zip Code _____			
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Not Married			
<input type="checkbox"/> Co-Borrower	<input type="checkbox"/> General Partner	<input type="checkbox"/> Guarantor	<input type="checkbox"/> Individual(s)
<input type="checkbox"/> Managing	<input type="checkbox"/> Member	<input type="checkbox"/> Member Trust	<input type="checkbox"/> President
<input type="checkbox"/> Shareholder	<input type="checkbox"/> Trustee	<input type="checkbox"/> Other _____	
Years as Business Owner/Investor _____		% of Borrowing Entity Owned _____	

### II. PERSONAL FINANCIAL STATEMENT

ASSETS (ROUNDED TO NEAREST DOLLAR)	LIABILITIES (ROUNDED TO NEAREST DOLLAR)
Cash on Hand and in Bank(s)      \$ _____	Unsecured Notes Payable (Bank & Other)      \$ _____
Savings Account(s)      \$ _____	Credit Card Balance(s)      \$ _____
IRA/Other Retirement Account(s)      \$ _____	Installment Loan(s)      \$ _____
Account(s) & Note(s) Receivable      \$ _____	Loan on Life Insurance      \$ _____
Life Insurance (Cash Surrender Value Only)      \$ _____	Mortgage(s) on Residence      \$ _____
Stocks and Bonds      \$ _____	Mortgage(s) on Investment RE      \$ _____
Personal Residence      \$ _____	Other Liability _____ \$ _____
Investment Real Estate (attach schedule)      \$ _____	Other Liability _____ \$ _____
Personal Property      \$ _____	Other Liability _____ \$ _____
Other Asset _____ \$ _____	TOTAL LIABILITIES      \$ _____
TOTAL ASSETS      \$ _____	NET WORTH (ASSETS LESS LIABILITIES)      \$ _____

### III. MONTHLY INCOME AND EXPENSE INFORMATION

	Individual	Spouse	Combined	MONTHLY EXPENSES
A. Base Salary	\$ _____	\$ _____	\$ _____	A. Rent      \$ _____
B. Commission/Bonus	\$ _____	\$ _____	\$ _____	B. First Mortgage (P&I)      \$ _____
C. Dividends/Interest	\$ _____	\$ _____	\$ _____	C. Other Financing (P&I)      \$ _____
D. Net Rental Income	\$ _____	\$ _____	\$ _____	D. Hazard Insurance      \$ _____
E. Other Income*	\$ _____	\$ _____	\$ _____	E. Real Estate Taxes      \$ _____
TOTALS	\$ _____	\$ _____	\$ _____	F. Installment Loans      \$ _____
* Describe Other Income _____				G. Credit Card Debt      \$ _____
** Describe Other Debt _____				H. Other Debt**      \$ _____

**IV. PERSONAL DECLARATIONS**

	INDIVIDUAL		SPOUSE	
	YES	NO	YES	NO
If the answer to any question A through F is YES, please provide a separate sheet with an explanation.				
A. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Have you declared bankruptcy within the last ten years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Have you had property foreclosed upon or given a deed-in-lieu thereof in the last ten years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Have you directly or indirectly been obligated on any loan that resulted in foreclosure or transfer of title in lieu of foreclosure or judgment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation bond, or loan guarantee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Are you a member of the armed forces or armed forces reserves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Are you a U.S. Citizen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Are you a permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Are any of your assets held in a trust? If YES, provide the name of the trust:  _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Are you a guarantor or co-signer for obligations not listed on this financial statement? If YES, provide the amount of the contingent liability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$ _____		\$ _____

**V. AUTHORIZATION AND SIGNATURES**

I/We, the undersigned, hereby authorize LoanStream Commercial or its designee (and any assignee or potential assignee) to make inquiries and obtain a credit report as necessary to verify the accuracy of the information and statements made to LoanStream Commercial and to determine my creditworthiness. I/We certify the statements and information contained in all documentation provided 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. I understand false or misleading statements may result in forfeiture of benefits and possible felony prosecution by the U.S. Attorney General (reference 18 U.S.C. § 1001). I/We acknowledge receipt of the "IMPORTANT DISCLOSURES" page of this application.

Authorized Signature	Date	Authorized Signature	Date
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