

Commercial Mortgage Application Form

Business Information

Business Name: _____

Business Address: _____

Type of Business: _____

Years in Operation: _____

Applicant Information

Full Name: _____

Phone Number: _____

SSN or EIN: _____

Property Information

Property Address: _____

Property Type: Office Warehouse Retail Other: _____

Property Value: \$ _____

Loan Amount Requested: \$ _____

Income & Financials

Revenue Source	Annual Amount	Expenses	Monthly Debt

Additional Information

Do you have existing liens on the property? Yes No

Have you ever filed for bankruptcy? Yes No

Declaration & Signature

I certify that all information is true and authorize verification.

Applicant Signature: _____ Date: _____