

AIRCRAFT LOAN APPLICATION

Aviation Financing -- Personal Financial Statement

Arthur Neil & Associates, LLC
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 submit to: john@arthurneil.us

These forms are intended for use in commercial transactions. Where any other use is contemplated, it is suggested that a careful review be made to insure compliance with applicable laws and regulations.

Personal Information

Applicant

Name _____
 Employer _____
 Employer's Address _____
 City _____ State _____ Zip _____
 Years on job _____ Title/Position: _____
 Business Phone _____
 If with current employer less than 3 years, provide name of previous employer _____
 Home Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Date of Birth _____
 Social Security # _____
 Cell Phone: _____ Fax: _____
 Email: _____

Financial Statement as of: _____
 (Date)

Co-Applicant

Name _____
 Employer _____
 Employer's Address _____
 City _____ State _____ Zip _____
 Years on job _____ Title/Position: _____
 Business Phone _____
 If with current employer less than 3 years, provide name of previous employer _____
 Home Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Date of Birth _____
 Social Security # _____
 Cell Phone: _____ Fax: _____
 Email: _____

Cash Income & Expenditures Statement for Year Ended _____

(omit cents)

Annual Income	Amount (\$)	Annual Expenditures	Amount (\$)
Salary (Applicant)	_____	Federal Income and Other Taxes	_____
Salary (co-Applicant)	_____	State Income and Other Taxes	_____
Bonuses & Commissions (applicant)	_____	Rental Payments Co-Op, Condo Maintenance	_____
Bonuses & Commissions (Co-Applicant)	_____	Mortgage Payments (Residential)	_____
Rental Income	_____	Mortgage Payments (Investment)	_____
Interest Income	_____	Property Taxes (Residential)	_____
Dividend Income	_____	Property Taxes (Investment)	_____
Capital Gains	_____	Interest & Principle Payments on Loans	_____
Partnership Income	_____	Insurance	_____
Other Investment Income	_____	Investments (Including tax shelters)	_____
Other Income (List)**	_____	Alimony/Child Support	_____
_____	_____	Tuition	_____
_____	_____	Other Living Expenses	_____
_____	_____	Medical Expenses	_____
_____	_____	Other Expenses (List)	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	Total Expenditures	\$ _____
_____	_____		
Total Income \$	_____		

Any Significant Changes expected in the next 12 months? Yes No (If yes, attach Information)

**Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

APPLICANT'S INITIALS _____

CO-APPLICANT'S INITIALS _____

Balance Sheet

as of _____
(Date)

Assets	Amount(\$)	Liabilities	Amount(\$)
Cash in banks (list) (including Money Market Accounts, CDs)	_____	Notes Payable to Banks (Schedule E)	
Cash in banks (list)	_____	Secured	_____
_____	_____	Unsecured	_____
_____	_____	Accounts Payable (include credit cards)	_____
_____	_____	Margin Accounts	_____
_____	_____	Notes Due: Partnership (Schedule D)	_____
_____	_____	Taxes Payable	_____
_____	_____	Mortgage Debt (Schedule C)	_____
_____	_____	Life Insurance Loans (Schedule B)	_____
_____	_____	Other Liabilities (List)	_____
Readily Marketable Securities (Schedule A)	_____	_____	_____
Non-readily Marketable Securities (Schedule A)	_____	_____	_____
Accounts and Notes Receivable	_____	_____	_____
Net Cash Surrender Value of Life Insurance (Schedule B)	_____	_____	_____
Residential Real Estate (Schedule C)	_____	_____	_____
Real Estate Investments (Schedule C)	_____	_____	_____
Partnership/PC Interests (Schedule D)	_____	_____	_____
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accounts	_____	_____	_____
Deferred Income	_____	_____	_____
(# of years deferred ____)	_____	_____	_____
Personal Property (including automobiles)	_____	_____	_____
Other Assets (list)	_____	_____	_____
_____	_____		
_____	_____	Total Liabilities \$	_____
_____	_____	Total Net Worth \$	_____
	Total Assets \$		_____

Contingent Liabilities

	Yes	No	Amount
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have any outstanding letters of credit or surety bonds?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are there any suits or legal actions pending against you?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are you contingently liable on any lease or contract?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are any of your tax obligations past due?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are any of your assets owned in a trust?	<input type="checkbox"/>	<input type="checkbox"/>	_____
What would be your total estimated tax liability if you were to sell your major assets?			_____

If yes for any of the above, give details:

APPLICANT'S INITIALS _____

CO-APPLICANT'S INITIALS _____

Schedule A: Securities (including non-money market mutual funds)

Readily Marketable Securities (including U.S. Government and Municipals)*

# of Shares Stock or Face Value Bonds	Description	(Owner(s))	Where Held	Cost	Current Market Value	Pledged Yes No
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>

Non-Readily Marketable Securities (closely held, thinly traded, or restricted stock)

_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>

*if not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B: Insurance

Life Insurance (use addition sheet if necessary)

Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Borrowed Amount	Ownership
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Disability Insurance

	Applicant	Co-Applicant
Monthly Distribution if Disabled	_____	_____
Number of Years Covered	_____	_____

Schedule C: Personal Residence & Real Estate Investments, Mortgage Debt
(Majority Ownership only)

Property Address	Legal Owner	Year Purchased	Purchase Price	Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Investment Residence (If additional space required add schdule)

_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

APPLICANT'S INITIALS _____

CO-APPLICANT'S INITIALS _____

Schedule D: Partnerships (less than majority ownership for real estate partnerships) *

(if additional space required, add schedule)

Business Professional (indicate name)

Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnerships, Notes, Cash Call	Final Contribution Date
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Investments (including tax shelters)

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

* NOTE: For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in case of partnership investments or S-corporations, schedule K01s.

Schedule E: Notes Payable

Due to	Type of Facility	Amount of Line	Secured		Collateral	Interest Rate	Maturity	Unpaid Balance
			Yes	No				
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____

Please answer the following questions:

1. Income tax returns filed through _____ Are any returns currently being audited or contested? Yes No
(Date)

If yes, What years? _____
(Date)

2. Have either of you, or any firm in which you were a major owner, ever declared bankruptcy? Yes No

If yes, please provide details: _____

3. Have you drawn a will? Yes No If yes, please furnish the name of the executor(s) and year will was drawn.
Executor(s) name: _____ Year: _____

4. Number of dependents (excluding self) and relationship to applicant:

APPLICANT'S INITIALS _____

CO-APPLICANT'S INITIALS _____

5. Have you ever had a financial plan prepared for you? Yes No

6. Did you include two years of federal and state tax returns? Yes No

7. Do either of you have a line of credit or unused credit facility at any institutions(s) Yes No

If yes, please indicate where, how much, and the name of the lender: _____

8. Do you anticipate any substantial inheritance? Yes No

If yes, please explain: _____

Aircraft Information

Make _____ Model _____ Year _____

FAA registration number _____ Serial number _____

Color _____ Airframe hours _____ Prop SOH Left _____ Right _____ Last annual date _____

Will Aircraft be hangered Yes No Airport based at _____

TTAF _____ RE SMOH _____ LE SMOH _____ Last annual date _____

Is there any damage history? Yes No

If yes, please explain: _____

Are All logs original? Yes No

Primary usage: Business/pleasure use (including industrial aid)
 Only for personal use
 Rental or Part 135 use

Seller is (check one) Dealer Broker Owner

Selling price \$ _____ Cash down \$ _____ Trade \$ _____ Finance amount \$ _____

Terms desired _____ To be titled in what/whose name _____

Prior aircraft financed by _____

Additional Equipment

<input type="checkbox"/> MKR BCN _____	<input type="checkbox"/> XPDR _____	<input type="checkbox"/> HSI _____	<input type="checkbox"/> RADAR ALT. _____
<input type="checkbox"/> NAV COM _____	<input type="checkbox"/> DME _____	<input type="checkbox"/> FLT DIR _____	<input type="checkbox"/> HOT PROPS
<input type="checkbox"/> GPWS _____	<input type="checkbox"/> GPS _____	<input type="checkbox"/> WX SCOPE _____	<input type="checkbox"/> WING BOOT
<input type="checkbox"/> TCAS _____	<input type="checkbox"/> RMI _____	<input type="checkbox"/> RADAR _____	<input type="checkbox"/> FULL DE-ICE
<input type="checkbox"/> ADF _____	<input type="checkbox"/> A/P _____	<input type="checkbox"/> PHONE _____	<input type="checkbox"/> A/C

APPLICANT'S INITIALS _____

CO-APPLICANT'S INITIALS _____

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

- To help the government fight the funding of terrorism and money laundering activities, federal law
- requires all financial institutions to obtain, verify, and record information that identifies each person
- who opens an account. What this means for you: When you open an account, we will ask for your
- name, address, date of birth, and other information that will allow us to identify you. We may also ask
- to see your driver's license or other identifying documents

.The information contained in this statement is provided to induce the recipient's lenders, it's agents or assigns to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept the guarantee thereof. Each of the undersigned represents warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquires you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you, your lender(s) it's agents or assigns any information it may have on the undersigned. As long as any obligation or guarantee of the undersigned to you, your lender(s) it's agents or assigns is outstanding, the undersigned shall supply annually an updated financial statement. The personal financial statement and any other financial or other information that the undersigned give you shall be your property. A photographic or carbon copy of this application bearing a photographic or carbon copy of the signature(s) of the undersigned may be deemed to be equivalent to the original hereof and may be used as a duplicate original.

APPLICANT'S SIGNATURE

DATE

CO-APPLICANT'/GUARANTOR'S SIGNATURE

DATE

CO-APPLICANT'S/GUARANTOR'S SIGNATURE

DATE

If you are requesting the financial accommodation jointly, please initial below.

"We intend to apply for Joint Credit"

Borrower

Co-Borrower