



## OWNER OCCUPIED LOAN CHECKLIST

1. General Information Form (attached or use your own)
2. Operating Company Tax Returns for Trailing Three Years
3. Current Interim Profit/Loss Statement & Balance Sheet of Operating Company (within 60 days)
4. Business Debt Schedule (*attached or use your own, if none mark NONE*)
5. Complete Personal Tax Returns for Trailing Three Years for All Principals (=>20% owners)
6. Personal Financial Statement for All Principals (=>20% owners)
7. Resume for Key Principals (*attached or use your own*)
8. Credit Authorization and Authorization to share information Form (attached), and a copy of credit bureau report & score (can obtain free at [www.creditkarma.com](http://www.creditkarma.com))

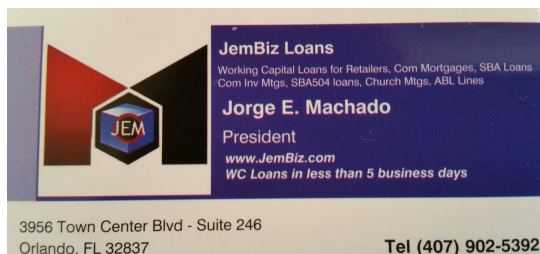
## INVESTMENT PROPERTY LOAN CHECKLIST (1 through 8 plus below)

9. Last 2 years & Year-to-Date Operating statement on property
10. Current Rent Roll (Name, Monthly Rent, Lease inception & maturity, square feet occupied)
11. Project Summary detailing project and any capital improvements in last 3 years or future

If you have additional information that you can provide such as a property appraisal, environmental reports, property photos, current credit report(s), etc., please include as this will typically help with the approval process.

Please complete, sign, date and return by either:

E-Mail to [JemBiz@JemBizLoans.com](mailto:JemBiz@JemBizLoans.com)





# General Information Form

## Loan Request Information (Please Complete All Information to Avoid Delays in Processing Your Application)

Application For:

- ☐ Commercial mortgage   ☐ SBA  
☐ Com Inv Property Mtg   ☐ Equipment Loan

**Purpose of Loan:**

**Source of Repayment:**

**Amount Requested: \$**

**Term Requested:**

**Amortization Requested:**

Collateral Description:	Market Value:	Purchase Price	Date of Purchase
1.	\$	\$	
2.	\$	\$	
3.	\$	\$	

### A. Applicant Information

Legal Name of Applicant (Borrower)				
DBA (If Applicable)			Tax I.D. Number	
Principle Place of Business Address (not P.O. Box)				
City	State	County/ Zip Code	Website Address	
Mailing Address (if different)				
City	State/Zip Code		Company E-mail	
Key Contact Name		Business Telephone Number (   )	Business Fax Number (   )	
Date Business Established	Current ownership (# of years)	State of Registration	Annual Sales \$	Net Profit-prev yr \$
Describe applicant's product/service			Number of Employees	
Type of Ownership (Select One) <input type="checkbox"/> Proprietorship <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp. <input type="checkbox"/> LLC <input type="checkbox"/> Professional Association <input type="checkbox"/> LLP			E-Mail Address	
Who does applicant currently do their business banking with?		Is applicant willing to move their banking relationship in conjunction with their loan? <b>Yes</b> <b>NO</b>		

### B. Owners Information

Name	Social Security Number	% Ownership	Title
Key Contact Name and Phone Number			

For more than four owners attach additional sheet(s).

### C. Loan Disclosures (Refinance)

Current lender	Rate	Start date	Monthly payment	Current balance
Property gross annual revenues	Annual expenses	Type of property	Number of Tenants	Estimated value

D. Loan Disclosures (Purchase)				
Purchase price	Will purchaser occupy 51% or more of the property	Type of property	Down payment	Estimated value
Property gross annual revenues	Annual expenses	Number of tenants	Is the property under contract	Anticipated settlement date

E. Other Information		
Settlement agent name _____ Insurance Company Phone Number (     ) _____		
Settlement agent phone number _____ Insurance Company Fax Number (     ) _____		
Is the seller of the property willing to carry a second trust? (Purchase only)	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Has The Applicant Ever Declared Bankruptcy Or Had Any Judgments, Repossessions, Garnishments Or Other Legal Proceeding Filed Against Them?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Is the applicant currently under contract with any other mortgage brokers?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Are Any Tax Obligations, Including Payroll or Real Estate Taxes, Past Due?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Is The Applicant Liable On Debts Not Shown, Including Any Contingent Liabilities Such As Leases, Endorsements, Guarantees, Etc.?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Is The Applicant Currently A Defendant In Any Suit Or Legal Action?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
<i>*If you answered yes to any of the above questions, please provide an explanation on a separate sheet</i>		

F. Certification And Signatures			
<p>Each of the undersigned hereby instructs, consents and authorizes the Lender/Broker, or any affiliate, subsidiary or assigns to obtain a consumer credit report and any other information relating to their individual credit status in the following circumstances: (a) relating to the opening of an account or upon application for a loan or other product or service offered by Lender by a commercial entity of which the undersigned is a principal, member, guarantor or other party, (b) thereafter, periodically according to the Lender's credit review and audit procedures, and (c) relating to Lender's review or collection of a loan, account, or other Lender product or service made or extended to a commercial entity of which the undersigned is a principal, member, guarantor or other party. The Applicant(s), individually and/or by the signature(s) of its authorized representative below, hereby certifies that: the foregoing has been carefully read by the Applicant and is given to the Lender/Broker for the purpose of obtaining the credit described above and other credit from time to time in whatever form; the information in this Application and any other documents or information submitted in connection with this Application or any other credit request are true and correct statements of the Applicant's financial condition and may be treated by the bank as a continuing statement thereof until replaced by a new Application or until the Applicant specifically notifies Lender/Broker in writing of any change; and the credit requested herein and any other credit obtained from the Lender/Broker by the Applicant on the basis of the information contained in this Application shall be used solely for business and commercial purposes. The Applicant and each Guarantor authorize the Lender/Broker to verify at any time any information submitted to the Lender/Broker by or on behalf of the Applicant and/or any Guarantor; obtain further information concerning the credit standing of the Applicant, its representatives and Guarantors; and exchange such credit information with others. The Applicant agrees to provide additional information, financial or otherwise, upon request and agrees that, unless otherwise directed by the Applicant in writing, all statements and notices regarding any credit granted by the Lender/Broker to the Applicant shall be mailed or faxed to the Applicant at the address or number shown above. Any person(s) signing below is duly authorized and empowered to request credit on behalf of the Applicant.</p> <p>Unless I/We initial here, the Lender/Broker is hereby authorized to share this application and credit information with its affiliates or other lenders, which may consider my/our application for loan approval/purchase. This statement does not limit the Lender/Broker's rights to sell or assign any loans to a third party.</p> <p>Applicant and each Guarantor initials: _____</p>			
Signature (Applicant)	Title	Print Name	Date
Signature (Guarantor)		Print Name	Date
Signature (Guarantor)		Print Name	Date

Applicant's Name \_\_\_\_\_



## SCHEDULE OF LIABILITIES

(Notes, Mortgages and Accounts Payable)

Date of Schedule \_\_\_\_\_

Name of Creditor & Note Annual Rate	Original amount	Original date	Current balance	Current or delinquent?	Maturity date	Payment amount (Month- Year)	How Secured

\_\_\_\_\_  
Signed

\*Place an asterisk next to loan to be refinanced with loan, & provide copy of note  
\*\* State original use of funds for loans to be paid off.

***Original Use of funds for loans being paid off above was:***

\_\_\_\_\_  
Title

## PERSONAL RESUME FORM

TO BE COMPLETED BY EACH PRINCIPAL INVOLVED IN THE LOAN  
*If you already have a prepared resume, submit in lieu of this form*

Name \_\_\_\_\_  
FIRST MIDDLE MAIDEN LAST

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Social Security No \_\_\_\_\_

U.S. Citizen – If not, please provide alien registration number \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Home phone \_\_\_\_\_ Business phone \_\_\_\_\_

Immediate past address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Are you employed by the U.S. Government? \_\_\_\_\_

If so, give the name of the agency and position \_\_\_\_\_

### Military Service Background

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Rank at discharge \_\_\_\_\_ Honorable? \_\_\_\_\_

Job Description \_\_\_\_\_

### Work Experience

List chronologically, beginning with present employment

Name of company \_\_\_\_\_ % of business owned \_\_\_\_\_

Full address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_ Duties \_\_\_\_\_

\_\_\_\_\_

Name of company \_\_\_\_\_ % of business owned \_\_\_\_\_

Full address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_ Duties \_\_\_\_\_

\_\_\_\_\_

Name of company \_\_\_\_\_ % of business owned \_\_\_\_\_

Full address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_ Duties \_\_\_\_\_

**Education (College or Technical Training)**

Name and Location	Dates Attended	Major	Degree or Certificate
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1. \_\_\_\_\_

Comments: \_\_\_\_\_

2. \_\_\_\_\_

Comments: \_\_\_\_\_

3. \_\_\_\_\_

Comments: \_\_\_\_\_

4. \_\_\_\_\_

Comments: \_\_\_\_\_



## PERSONAL FINANCIAL STATEMENT

IMPORTANT: Read these directions before completing this Statement

- ☐ If you are applying for individual credit in your own name and are relying on your own income, or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1, 3 and 4.
- ☐ If you are applying for joint credit with another person, complete all Sections and provide information in Section 2 about the joint applicant **AND INITIAL THE FOLLOWING STATEMENT: *We intend to apply for joint credit*** **Section One Individual:** \_\_\_\_\_ **Section Two Individual:** \_\_\_\_\_.
- ☐ If you are applying for individual credit but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections. Provide information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying on. Alimony, child support, or separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Section 1 - Individual Information (type or print)		Section 2 - Other Party Information (type or print)	
Name		Name	
Address		Address	
City, state & zip		City, state & zip	
Position or occupation	Email:	Position or occupation	Email:
Business name		Business name	
Business address		Business address	
City, state & zip		City, state & zip	
Length of employment		Length of employment	
Res. Phone	Bus. phone	Res. Phone	Bus. Phone

Section 3 - Statement of Financial Condition as of _____ 20 _____			
Assets (Do not include assets of doubtful value)	In dollars (omit cents)	Liabilities	In Dollars (omit cents)
Cash on hand and in banks		Notes payable to banks due in year or less -see Schedule E	
Cash surrender value-life insurance-see Schedule D		Notes payable to others - see Schedule E	
U.S. Gov't & marketable securities-see Schedule A		Unsecured Revolving Debt	
Securities held by broker in margin accounts		Auto Loans - \$ / Month	
<b>Total Liquid Assets</b>		Other Time Notes - \$ / Month	
Non-marketable securities-see Schedule B		Accounts and bills due	
Retirement Funds (IRA, 401k, SEP, other)		Unpaid income tax	
Wholly owned Real estate owned-see Schedule C		Other unpaid taxes and interest	
Net Real estate interest Partially see Schedule F		Real estate mortgages payable-see Schedules C & E	
Accounts, loans, and notes receivable		Other debts -itemize	
Automobiles			
Other personal property			
Business owned Value – Schedule F			
Other assets-itemize-see Schedule F if applicable			
		<b>Total Liabilities</b>	
		<b>Personal Net Worth</b>	
<b>Total Assets</b>		<b>Total Liabilities and Net Worth</b>	

Section 4 - Annual Income For Year Ended _____ 20 _____		Annual Expenditures	Contingent Liabilities	Estimated Amounts
Salary, bonuses & commissions \$ _____	Mortgage/rental payments \$ _____	Do you have any . . .	Yes No	
Dividends & interest _____	Real estate taxes & assessments _____	Contingent liabilities (as endorser, Co-maker or guarantor? . . .	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
Real estate income _____	Insurance payments _____	On Leases? on contracts?)		
Other Income _____	Other contract payments _____	Involvement in pending legal actions?	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
(alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)	(car payments, charge cards etc.) _____	Other special debt or circumstances?	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
	Alimony, child support, Maintenance _____	Contested income tax liens?	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
	Other expenses _____	Have any signer or applicant Filed for bankruptcy in last 7 years?	<input type="checkbox"/> <input type="checkbox"/>	
<b>Total Income</b> \$ _____	<b>Total Expenditures</b> \$ _____	<b>Total Contingent Liabilities</b> \$ _____		

(COMPLETE SCHEDULES AND SIGN ON REVERSE SIDE)



### SCHEDULE A - U.S. GOVERNMENT & MARKETABLE SECURITIES

Number of Shares or Face Value of Bonds	Description	In Name of	Are These Registered Pledged or Held by others?	Market Value

### SCHEDULE B - NON-MARKETABLE SECURITIES

Number Of Shares	Description	In Name of	Are These Registered Pledged or Held by Others?	Value	Source Of Value

### SCHEDULE C - RESIDENCES AND OTHER REAL ESTATE (PARTIALLY OR WHOLLY OWNED)

Address and Type of Property	Title in Name of	% of Ownership	Date Acquired	Cost	Market Value	Monthly Payment	Mortgage Amount	Mortgage Maturity
Residence(s)								
Residence(s)								
Other								
Other								

### SCHEDULE D - LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE

Name of Insurance Company	Owner of Policy	Beneficiary and Relationship	Face Amount	Policy Loans	Cash Surrender Value

### SCHEDULE E - BANK AND OTHER INSTITUTIONAL RELATIONSHIPS

Name and Address of Creditor	Original Loan/ Line Amount	Date of Loan	Maturity Date	Unsecured or Secured (List collateral)	Amount Owed

### SCHEDULE F - BUSINESS VENTURES AND NET REAL ESTATE INTERESTS

List Name and Address of Any Business Venture In Which You Are a Principal or Partner	Total Assets Listed In Section 3	Your % of Ownership	Your Position/Title In the Business	Total Assets Of Re Value	Line of Business or type of RE	Years Owned

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty 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 a guaranty 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. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit worthiness of the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Signature (individual) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date signed \_\_\_\_\_, 20\_\_\_\_

Date of Birth \_\_\_\_\_

Signature (other party) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date signed \_\_\_\_\_, 20\_\_\_\_

Date of Birth \_\_\_\_\_



## RENT ROLL for property being financed

Unit #	Unit Type	Tenant Name	Square Feet	Monthly Rent	Term		Comments (Renewals, Rent Increases, etc.)
					Start	End	
Totals:							

Rent Roll Certification:

I/We certify that the attached rent roll(s) dated \_\_\_\_\_

for the property located at \_\_\_\_\_

Is/are true and correct.

By: \_\_\_\_\_



## CREDIT AUTHORIZATION FORM

The undersigned individual, who is either a principal/owner of the applicant for a business loan, or intends to or is a guarantor of the Company's obligations, provides this written authorization to JEM Business Innovative Solutions (JEMBIZ Loans), together with its affiliates or assigns, authorizing review of the undersigned individual's personal credit profile by inquiry to a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting loan, if such loan is made. A Photostat or facsimile copy of this authorization shall be valid as the original. By signature below (either electronic, facsimile or original), I/we affirm our identity as the respective individuals identified in the related business credit application.

This form and authorization shall cease to be valid once an application is withdrawn, or declined and closed, or after any such loan which extends from this application is paid and satisfied in full, or by operation of law.

Company/DBA
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Print Name/Title	SSN
Personal Address/ Residence	City, State and Zip Code
Signed	Date

Print Name/Title	SSN
Personal Address/ Residence	City, State and Zip Code
Signed	Date

Print Name/Title	SSN
Personal Address/ Residence	City, State and Zip Code
Signed	Date

Please use only complete and legal name(s), with signature(s) being those of only duly authorized corporate officers(s), partner(s), member(s) or proprietor. This authorization also permits JEMBIZ Loans or its assigns to obtain personal bank checking and/or loan account ratings if provided by applicant. Thank you for your cooperation.

## AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to Lender and/or assigns any and all information Lender and/or assigns may require at any time for any purpose related to our credit application and/or loan transaction with Lender and/or assigns.

I/We hereby authorize LENDER to release any and all information and/or data (including but not limited to personal and/or business financial statements, personal and/or business income tax returns, payment and/or credit history) to any entity LENDER deems necessary for any purpose related to our credit application/loan transaction with LENDER and/or assigns.

I/We hereby acknowledge that all loan approvals will be in writing and subject to the terms and conditions set forth therein.

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Authorized Signature, Title

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Date

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Authorized Signature, Title

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Date

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Authorized Signature, Title

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Date

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Authorized Signature, Title

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Date