



COMMERCIAL LOAN APPLICATION

This checklist is provided to assist in gathering the necessary information needed for the initial evaluation of your loan request. **Complete information is necessary to process your application.** All applicable forms are provided herewith. If there are any questions concerning this information, please do not hesitate to call (303) 770-2262, Fax (303) 770-2276.

- Project Questionnaire**
- Application for Business Loan**
- Environmental Questionnaire and Disclosure Website**
- Executive Summary**

Provide a complete executive summary for the loan or project. An executive summary is an overview. The purpose of an executive summary is to summarize the key points of a document for its readers, saving them time and preparing them for the upcoming content. Think of the executive summary as an advance organizer for the reader. Above all else, an executive summary has to be clear and concise. In business, the most common use of an executive summary is as part of a business plan. The executive summary in a business plan serves the same purposes as an executive summary in any other document and one more – in a business plan, an executive summary also has to entice the reader to read the rest of the business plan. For this reason, the executive summary is often called the most important part of the business plan. If it doesn't do what it's supposed to do, the business plan will be set aside unread.
- Use of Funds Statement**

Provide a statement containing the specific uses for the funds obtained by this financing package.
- Business Financial Statements**

Provide a complete copy of Balance Sheets and Income Statements, current within 45 days and for the last three fiscal years. (For a new business, a pro forma balance sheet is required that reflects what you expect the balance sheet position to be on the day the business opens. It should include proposed equity and capital and anticipated loan proceeds.)
- Pro Forma**

Provide a pro forma for the specific performance of the project including information on the repayment of the financing.
- Accounts Receivable and Accounts Payable Aging**

Provide agings as of the current interim financial statement.
- Business Tax Returns**

Provide complete copies with all schedules for the last three fiscal years.
- Projected Income Statement**

Provide projections by month for a minimum of one year if loan proceeds will be used for expansion or for a new business, if business cycle is seasonal, or if trends are erratic. Projections must include detailed assumptions.
- Personal Tax Returns**

Provide complete copies with all schedules for the last three years on all owners, partners, officers, directors, guarantors, and stockholders with 20% or more stock ownership.

- Management Resume**
Provide on all owners, partners, officers, directors, guarantors, and stockholders of record. (Additional forms available upon request.)
- History of Business and Benefits of Loan**
Provide a narrative of the business containing as much information as possible about start up, ownership, nature of the business and its products/services, marketing and customer profile, major past accomplishments, long term goals, etc. Be sure to explain how the loan for which you are applying will benefit your business. Pictures, brochures or advertisements, a list of key customers and major competitors are helpful exhibits to attach. (For a new business, this information should be in the form of a business plan and/or feasibility study.)
- Schedule of Business Debt**
Provide a current business debt schedule as of the current interim financial statement.
- Personal Financial Statement**
Provide current statements within 45 days on all owners, partners, officers, directors, guarantors, and stockholders with 20% more stock ownership. (Additional forms available upon request.)
- Articles of Incorporation/Organization** (filed copies), **Bylaws** (if applicable, amendments), **Certificate of Incorporation/Organization**, **Assumed Name Certificate**, and/or **Partnership Agreement**
- Affidavit of Ownership/Authority**
- Request for Copy or Transcript of Tax Return (IRS Form 4506)**
- Other:**

For Business Real Estate Loans:

- Purchase Contract/Buy-Sell Agreement**
For purchase of owner-occupied real estate, provide a copy of the signed contract and all exhibits/addenda.
- New Construction**
Provide a copy of the construction contract (“draft” copy of acceptable) and a copy of the plans/specs for the project. If in the planning stages, provide a copy of the initial projected cost analysis.
- Refinancing**
Provide a complete copy of the note(s) and Deed(s) of Trust on the real estate to be refinanced.
- Schedule of Real Estate Owned**
Provide the property address, property status (rental, pending sale, sold, etc.), property type (single family, condo, multiplex, land, office, warehouse, etc.), market value, outstanding liens, gross rent, current payment amounts, additional expenses (taxes, insurance, management, etc.), and any comments for each property owned.
- Appraisal**
Provide a copy of the most recent real estate appraisal and/or the most recent tax appraisal.

For Business Equipment Loans:

- Purchase Order or Invoice**
Provide a copy of the purchase order or invoice for machinery or other equipment to be purchased. If the proposed purchase is in the preliminary planning stage, provide a copy of the quote(s).
- Refinancing**
Provide a complete equipment list with serial numbers of all currently owned machinery or other equipment. In addition, provide a complete copy of the note(s) on machinery or other equipment to be refinanced.

For Business Acquisition Loans:

- Purchase contract/Buy-Sell Agreement**
Provide a copy of the signed contract and all exhibits/addenda. The contract should provide for the allocation of the purchase price.
- Business Financial Statement**
Provide complete copies of Seller's Balance Sheets and Income statements, current within 45 days and for the last three fiscal years.
- Business Tax Returns**
Provide complete copies of Seller's Tax Returns for the last three fiscal years.
- Request for Copy or Transcript of Tax Return (IRS Form 4506)**
This form is to be signed by the Seller.

Other:

- Authorization To Release Information**
This form is to be signed by all owners, partners, officers, directors, guarantors, and stockholders of record.
- Lease(s)**
Provide a copy of your existing lease(s) and/or proposed lease(s) as applicable, including all exhibits/addenda.
- Franchise Agreement and Uniform Franchise Offering Circular**
Provide a copy of these documents as provided by the franchisor.
- Affiliate(s)**
Provide complete copies of Business Tax Returns with all schedules for the last three fiscal years and a current financial statement within 45 days on affiliate(s).



PROJECT QUESTIONNAIRE

Project Name:

Project Type: (First Mortgage, Construction Loan, Bridge Loan, Mezzanine Loan, Second Mortgage, etc.)

Do you want to use an SBA loan? (Must be 50% owner used.)

Do you believe this loan will require a hard money lender? (More expensive but more lenient)

Do you need a bridge loan? (Very fast, Short term, More expensive loan)

Amount of loan requested in USD

Completed value of the project in USD

Amount of the down payment (if applicable)

Property address

Property address 2

City, State, Zip, and *County* (required)

Type of property (agricultural, land, office, multi-family, hospitality, etc.)

Gross rentable area in sq ft

Net rentable area in sq ft

Number of units

Number of vacancies if known

Vacancy rate for area

Description of Building(s)

Age of Building(s)

Last Renovated?

Purpose of Loan (Cash out, maturing loan, new construction, renovation, expansion, etc)

Interest rate desired?

Amortization schedule desired?

Loan term desired?

Special problems, issues, or needs

BORROWER INFORMATION

Borrower 1

Name of borrowers

Type of Entity

Occupation

Annual Income

Net worth

Credit score

Borrower 2

Name of borrowers

Type of Entity

Occupation

Annual Income

Net worth

Credit score

PROPERTY INCOME

Gross scheduled income (include the market rent of any vacant or owner used)

EXPENSES

Real estate taxes

Insurance

Management expenses

Repairs and maintenance

Reserves for replacement

Utilities

Other operating expenses



APPLICATION FOR BUSINESS LOAN

APPLICANT COMPANY

Company Name _____ Telephone: (____) _____

Fax: (____) _____ Email: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Type of Business: _____ Date Established: _____

Type of entity: Corporation Partnership Sole Proprietorship Other

Number of Employees: Existing: _____ If Loan is Approved: _____ Affiliates: _____

Have you or any officer of your company ever been:

Involved in bankruptcy or insolvency proceedings? Yes No (If yes, furnish details in a separate exhibit.)

Currently Exporting? Yes No

Planning to Export? Yes No

Exporting Information Needed? Yes No

Bank Contract: _____ Telephone: (____) _____

Accountant Name: _____ Telephone: (____) _____

Attorney Name: _____ Telephone: (____) _____

Ownership of Applicant Company – List below all officers, directors, partners, owners and co-owners, and all stockholders of record. All (100%) stock ownership must be shown. Include a resume for each person listed below and a personal financial statement if ownership is over 20%.

NAME	TITLE	% OF OWNERSHIP	ANNUAL COMPENSATION

AFFILIATES – List below all business concerns in which the applicant company or any of the individuals listed in the ownership section above have any ownership

COMPANY NAME	OWNER (APPLICANT COMPANY OR INDIVIDUALS)	% OF OWNERSHIP

PREVIOUS GOVERNMENT FINANCING – If you or any principals or affiliates have ever requested government financing (including SBA loans and government guaranteed student loans), complete the following.

NAME OF AGENCY	AMOUNT	DATE	APPROVED OR DECLINED	BALANCE	STATUS

SUMMARY OF PROJECT COST

Land and Improvements	\$ _____
Building Construction	\$ _____
Machinery & Equipment	\$ _____
Inventory	\$ _____
Working Capital	\$ _____
Other _____	\$ _____
Refinance Existing Debt*	\$ _____
Total Project Cost	\$ _____
Less Owners Equity	\$ _____
Less Seller Debt	\$ _____
Total Loan Requested	\$ _____

COLLATERAL VALUE

Land and Improvements	\$ _____
Machinery & Equipment	\$ _____
Furniture & Fixtures	\$ _____
Accounts Receivable	\$ _____
Inventory	\$ _____
Other _____	\$ _____
Total Collateral Value	\$ _____

* Lender _____	\$ _____
Lender _____	\$ _____
Lender _____	\$ _____

SOURCE OF COLLATERAL VALUATIONS



Environmental Questionnaire and Disclosure Statement

Dear Applicant:

Toxics and hazardous waste are issues of great public concern. Newspapers carry headlines daily about the costs of remedying environmental problems. The cost of cleaning up a contaminated site can often exceed the value of the property itself.

You are proposing to secure a loan with commercial real estate. It is in both of our interests to be sure that your investment is free of known contamination and your future is free of the financial impact of huge cleanup costs.

Enclosed is an Environmental Questionnaire and Disclosure Statement. Please fill it out as completely as possible. A questionnaire such as this, which is a requirement by most lenders and the SBA, is a very important part of your application. If a current Phase I and/or Phase II survey is being provided, skip Section I. If this is a purchase, you should ask your seller to fill out Section I. If you complete this section yourself, please request the information you don't know. An answer of "Unknown" is only acceptable if, after reasonable inquiry, that is truly the appropriate response to the question, and it may trigger an environmental assessment.

Under CERCLA, the federal "Superfund" law, past and present owners of contaminated property may be liable for clean up **costs even if they did not cause the contamination**. Most states and even some counties have similar laws. Sonoma Bank (SB) encourages you to exercise due diligence in determining whether hazardous substances are present on the property, prior to purchase. SB is NOT AN EXPERT in identifying potential environmental issues. DO NOT RELY on any actions by SB as any indication that SB has determined that your property is clear of toxic materials and other contaminants.

We hope this letter has explained the importance of this questionnaire. Please do not hesitate to call if you have any questions or if we may be of any assistance.

Sincerely,



ENVIRONMENTAL QUESTIONNAIRE AND DISCLOSURE STATEMENT

Applicant: _____

Address or location of property: _____

The purpose of this questionnaire is to provide information about the past and present ownership and uses of the real property upon which lender will rely for security in deciding whether to extend credit. Please respond fully to all questions, including attaching supporting documentary evidence where appropriate. If unable to answer after diligent inquiry, respond “unknown” and explain why the information is unavailable. If space is inadequate to answer, please attach additional pages as needed. If applicant conducts business at multiple locations, a separate disclosure statement should be supplied for each location.

I. HISTORY OF PROPERTY

1. The present and previous owner(s)/occupant(s) (if different than owner), and the time period of each owner or occupant of the property (start with present and include a twenty year history if possible):

	<u>Owner</u>	<u>Period</u>	<u>Occupant (if different)</u>	<u>Use of Property</u>
A.				
B.				
C.				
D.				
E.				
F.				

2. Date of last transfer of ownership:

A. Was a pre-acquisition site assessment or environmental survey performed? YES NO
(check one)

If yes, include a copy of the report.

3. Describe present and previous use(s) of the adjacent (bordering) properties (describe the location of the adjacent properties in the last column – e.g., property to the East or Northeast).

	<u>Present</u>	<u>Prior (indicate dates)</u>	<u>Location</u>
A.			
B.			
C.			
D.			

4. Were any of the uses of adjacent properties a disposal facility, a dump site, storage for, or involving use of chemicals, hazardous waste or toxic materials? YES NO

If yes, please identify and explain.

5. State the year in which buildings or improvements on the premises were constructed.

Do any building materials contain asbestos? YES NO

A. Have any asbestos tests or surveys been performed on the site? YES NO

B. If yes, attach test/survey reports. If not available, describe results.

6. Are there electrical transformers, switches, capacitors, or other comparable devices on or adjacent to the premises? YES NO

A. If yes, have they been inspected for the presence of PCBs or other hazardous toxic substances? YES NO

B. If yes, attach inspection reports. If report is not available, describe results.

C. Have there been any leaks, spills, or fires on site involving PCB electrical equipment? YES NO

If yes, please describe.

7. Are there now or have there ever been, underground storage tanks located on the property or the properties adjacent to the site? YES NO

A. If yes, indicate the number of tanks, the contents and age or date of removal of each tank.

B. Have any of the following been provided for the underground tanks and their associated piping?

- | | |
|--|--|
| <input type="checkbox"/> integrity testing | <input type="checkbox"/> inventory reconciliation |
| <input type="checkbox"/> leak detection system | <input type="checkbox"/> overfill spill protection |
| <input type="checkbox"/> secondary containment | <input type="checkbox"/> other (please describe) cathodic protection |

Please attach any supporting documents

C. Has leak or potential leak ever been detected in these tanks? YES NO

D. If yes, describe the remediation efforts and attach all supporting documents.

8. Are there any above or below ground pipelines on site now which are used to transfer chemicals? YES NO

A. If yes, please describe.

B. Have the pipelines been inspected or tested for leaks? YES NO

If yes, please indicate the results, and attach all supporting documents.

9. Are there chemicals, hazardous waste or toxic materials currently stored, or have they been stored, on site in the past?
 YES NO

A. If yes, check all applicable categories of storage methods:

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> drums | <input type="checkbox"/> containers | <input type="checkbox"/> waste piles |
| <input type="checkbox"/> pits | <input type="checkbox"/> sumps | <input type="checkbox"/> above-ground tanks |
| <input type="checkbox"/> surface impoundments/ponds/lagoons | | |

10. Has there been, or is there now, any physical evidence of spills, leaks, or other release of chemicals, hazardous wastes or toxic materials on the property or the adjacent property?
 YES NO

A. If yes, please describe.

11. Are there any past, current or pending regulatory actions, lawsuits or administrative proceedings involving the present business or the subject property alleging non-compliance with environmental regulations or environmental damages?
 YES NO

A. If yes, please describe, and attach all relevant documents.

12. Has the subject property or any nearby property ever been listed, proposed or investigated as a federal or state Superfund site?
 YES NO

A. If yes, please describe and attach all relevant documents.

I/We are familiar with the real property described in this questionnaire. By signing below, I/we represent and warrant to Sonoma Bank that the answers to the above questions are complete and accurate to the best of my/our knowledge and that reasonable inquiry has been made to complete these answers. I/we also understand that Sonoma Bank will rely on the completeness and accuracy of the answers in assessing any environmental risks associated with the property.

THE ABOVE INFORMATION PROVIDED BY _____
(Please explain source)

SMALL BUSINESS CONCERN:

INDIVIDUALS:

BY: _____

(Title)

BY: _____

DATE: _____

(Title)

DATE: _____



AFFIDAVIT OF OWNERSHIP/AUTHORITY

I _____ (Name), as _____ (Position)
 of _____ (Company Name)
 located at _____
 do hereby certify that the following is a list of the shareholders/partners/owners, directors, and officers of the
 company as of _____ (Date).

Shareholders (Corporation)
 Partners (Partnership)
 Owners (Proprietorship)
 Other _____

	%
	%
	%
	%
	%

TOTAL = 100%

DIRECTORS:

OFFICERS:

Chairman of the Board	
President	
Vice President	
Secretary	
Treasurer	
Other _____	
Other _____	
Other _____	
Other _____	

If additional space is required, use back of page

Signature: _____ Title: _____ Date: _____



MANAGEMENT RESUME

(Resume is required for all stockholders of record, and for all owners, partners, officers, directors and guarantors.)

Name: _____ SS#: _____
First Middle (Full) Maiden Last

Date of Birth: _____ Place of Birth: _____

Residence Telephone: (____) _____ Business Telephone: (____) _____

Residence Address: _____ From: _____ To: _____
Street City State Zip (MM/YY) (MM/YY)

Previous Address: _____ From: _____ To: _____
Street City State Zip (MM/YY) (MM/YY)

Spouse's Name: _____ SS#: _____
First Middle (Full) Maiden Last

Are you employed by the U.S. Government? Yes No If yes, give agency/position: _____

Are you a U.S. Citizen? Yes No If no, give Alien Registration Number*: _____

Have you ever been charged with or convicted of any criminal offense other than a misdemeanor involving a motor vehicle violation? Yes No If yes, furnish details in a separate exhibit.

Have you ever declared bankruptcy? Yes No If yes, furnish details in a separate exhibit.

Do you have any pending lawsuits? Yes No If yes, furnish details in a separate exhibit.

EDUCATION

NAME AND LOCATION	DATES ATTENDED		MAJOR	DEGREE OR CERTIFICATE
	From	To		
College	MM/YY	MM/YY		
High School	MM/YY	MM/YY		

Did you obtain a government guaranteed student loan for any portion of your education? Yes No

Continuing Education Courses: _____

MILITARY SERVICE BACKGROUND

Branch: _____ From: _____ To: _____ Honorable Discharge? _____

Rank at Discharge: _____ Major Assignment/Accomplishment: _____

WORK EXPERIENCE (List chronologically, beginning with present employment)

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Company Name/Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Professional Associations, Offices Held, Community Involvement, etc:

Signature: _____ Date: _____

Please attach your own full resume, if applicable *include a copy of Alien Registration Card (front and back)



HISTORY OF BUSINESS AND BENEFITS OF LOAN

(Use separate attachments to answer questions as necessary)

BACKGROUND AND HISTORY OF PRINCIPALS AND COMPANY

NATURE OF BUSINESS, TYPES OF PRODUCTS / SERVICES

CUSTOMER PROFILE

LIST KEY CUSTOMERS

LIST MAJOR COMPETITORS

MAJOR PAST ACCOMPLISHMENTS

FUTURE EXPANSION

Does your company currently have plans for future expansion? _____

Number of locations? _____ Over what period of time? _____

How many new company locations are planned for this market? _____

HOW WILL THIS LOAN BENEFIT YOUR COMPANY?

WILL THE FUNDING OF THIS LOAN CREATE NEW EMPLOYMENT OPPORTUNITIES?

Signature: _____ Date: _____

SCHEDULE OF BUSINESS DEBT

Company Name: _____ (Attach copies of notes, inclusive of applicable security documents, to be paid with loan proceeds)

CREDITOR Name/Address	ORIGINAL DATE	ORIGINAL AMOUNT	PRESENT BALANCE*	RATE OF INTEREST	MATURITY DATE	MONTHLY PAYMENT	COLLATERAL
	(mm/dd/yy)	\$	\$		(mm/dd/yy)	\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
		\$	\$			\$	
TOTAL PRESENT BALANCE as of _____*			\$				

*as of interim balance sheet

**indicate any notes that have at any time been 29 days or more past due.

Signature _____ Date _____

PERSONAL FINANCIAL STATEMENT**U.S. SMALL BUSINESS ADMINISTRATION**

As of _____, 20____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State & Zip Code	
Business Name of Applicant / Borrower	

ASSETS		LIABILITIES	
	(Omit Cents)		(Omit Cents)
Cash on hand & Banks	\$	Accounts Payable	\$
Savings Accounts	\$	Notes Payable to Banks and Others (Describe in Section 2)	\$
IRA or Other Retirement Account	\$	Installment Account (Auto) Mo. Payment \$	\$
Accounts & Notes Receivable	\$	Installment Account (Other) Mo. Payment \$	\$
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$	Loan on Life Insurance	\$
Stock and Bonds (Describe in Section 3)	\$	Mortgages on Real Estate (Describe in Section 4)	\$
Real Estate (Describe in Section 4)	\$	Unpaid Taxes (Describe in Section 6)	\$
Automobile – Present Value	\$	Other Liabilities (Describe in Section 7)	\$
Other Personal Property (Describe in Section 5)	\$	Total Liabilities	\$
Other Assets (Describe in Section 5)	\$	Net Worth	\$
Total:	\$	Total:	\$

Section 1. Source of Income		Contingent Liabilities	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims and Judgments	\$
Real Estate Income	\$	Provision for Federal Income Tax	\$
Other Income (Describe below)*	\$	Other Special Debt	\$

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted towards total income.

Section 2. Notes Payable to Banks and Others		(Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)			
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly, etc.)	How Secured or Endorsed Type of Collateral
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		

SBA Form 413 (5-91) Previous Editions Obsolete Ref SOP 50-10 and 50-30

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation / Exchange	Date of Quotation / Exchange	Total Value

Section 4. Real Estate Owned (List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)			
	Property A	Property B	Property C
Type of Property			
Address	_____	_____	_____
Name of Title Holder			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder	_____	_____	_____
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month / Year			
Status of Mortgage			

Section 4. Real Estate Owned (List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)			
	Property D	Property E	Property F
Type of Property			
Address	_____	_____	_____
Name of Title Holder			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder	_____	_____	_____
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month / Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency.)

Section 6. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value policies – name of insurance company and beneficiaries.)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments 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 statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001)

Signature: _____ Date: _____
Social Security Number: _____

Signature: _____ Date: _____
Social Security Number: _____

PLEASE NOTE: The 69X estimate average burden hours for the completion of this form is 1.5 hours per response. If you have any questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Office, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503



AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to Colorado Real Estate Finance Group, Inc. and/or any affiliates of any and all information that they may require for the purpose of a credit transaction. I/We further authorize Colorado Real Estate Finance Group, Inc. and/or any affiliates to release such information to any entity they deem necessary for any purpose related to our credit transaction with them.

I/We certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

This Schedule of other real estate owned is to be attached to and made a part of my Loan Application and Financial statement dated _____ for property at _____

SCHEDULE OF REAL ESTATE OWNED

PROPERTY ADDRESS	# Units	% Of Ownership	TYPE OF PROPERTY	ACQUISITION DATE/COST		NAME AND ADDRESS OF LENDER	LOAN NUMBER	MARKET VALUE	BALANCE OF MORTGAGE	CASH FLOW					
										(1) MONTHLY RENTAL INCOME	(2) MONTHLY OPERATIONAL EXPENSES	(3) MONTHLY LOAN PAYMENT	NET INCOME Column (1) less 2 & 3		
					1st										
					2nd										
					1st										
					2nd										
					1st										
					2nd										
					1st										
					2nd										
					1st										
					2nd										
% Ownership Adjusted:						Income									
% Ownership Adjusted:						Personal Residence									
% Ownership Adjusted:						Total									

REMARKS _____

SIGNED: _____

SIGNED: _____



Print out additional REO Schedule form if required.

Request for Transcript of Tax Return

Department of the Treasury
Internal Revenue Service

- ▶ Do not sign this form unless all applicable parts have been completed.
Read the instructions on page 2.
- ▶ Request may be rejected if the form is incomplete, illegible, or any required part was blank at the time of signature.

TIP: Use new Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506**, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return	2b Second social security number if joint tax return : : : :
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code	
4 Address, (including apt., room, or suite no.), city, state, and ZIP code shown on the last return filed if different from line 3	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.	

CAUTION: Lines 6 and 7 must be completed if the third party requires you to complete Form 4506-T. Do not sign Form 4506-T if the third party requests that you sign Form 4506-T and lines 6 and 7 are blank.

6 Product requested. Most requests will be processed within 10 business days. If the product requested relates to information from a return filed more than 4 years ago, it may take up to 30 days. Enter the return number here and check the box below. ▶ _____

- a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. Transcripts are generally available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years
- b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns
- c Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years
- d Verification of Nonfiling**, which is proof from the IRS that you did not file a return for the year
- e Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2003, filed in 2004, will not be available from the IRS until 2005. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213

CAUTION: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

7 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T.

_____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer.

Sign Here	Signature (see instructions)	Date	Telephone number of taxpayer on line 1a or 2a ()
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	

A Change To Note

• **New Form 4506-T**, Request for Transcript of Tax Return, is used to request tax return transcripts, tax account transcripts, W-2 information, 1099 information, verification of non-filing, and a record of account. **Form 4506**, Request for Copy of Tax Return, is now used only to request copies of tax returns.

Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series) and one for all other transcripts.

Note: *If you are requesting more than one transcript or other product and the chart below shows two different service centers, mail your request to the service center based on the address of your most recent return.*

Chart for individual transcripts (Form 1040 series)

If you lived in and filed an individual return:	Mail or fax to the Internal Revenue Service at:
Maine, Massachusetts, New Hampshire, New York, Vermont	RAIVS Team 310 Lowell St. Stop 679 Andover, MA 01810 978-691-6859
Alabama, Florida, Georgia, Mississippi, North Carolina, South Carolina, West Virginia, Rhode Island	RAIVS Team 4800 Buford Hwy. Stop 91 Chamblee, GA 30341 678-530-5326
Arkansas, Colorado, Kentucky, Louisiana, New Mexico, Oklahoma, Tennessee, Texas	RAIVS Team 3651 South Interregional Hwy. Stop 6716 Austin, TX 78741 512-460-2272
Alaska, Arizona, California, Hawaii, Idaho, Montana, Nevada, Oregon, Utah, Washington, Wyoming	RAIVS Team Stop 38101 Fresno, CA 93888 559-253-4992
Delaware, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, South Dakota, Wisconsin	RAIVS Team Stop B41-6700 Kansas City, MO 64999 816-823-7667
Ohio, Virginia	RAIVS Team 5333 Getwell Rd. Stop 2826 Memphis, TN 38118 901-546-4175

Connecticut, District of Columbia, Maryland, New Jersey, Pennsylvania, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team DP SE 135 Philadelphia, PA 19255-0695 215-516-2931
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Chart for all other transcripts

If you lived in:	Mail to the Internal Revenue Service at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Washington, Wyoming	RAIVS Team Mail Stop 6734 Ogden, UT 84201 801-620-6922
Connecticut, Delaware, District of Columbia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800F Cincinnati, OH 45250 859-669-3592

Line 1b. Enter your employer identification number if your request relates to a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 60 days of the date signed by the taxpayer or it will be rejected.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 7.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. Sections 6103 and 6109 require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to Federal and state agencies to enforce Federal nontax criminal laws and to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 11 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Tax Products Coordinating Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **Do not** send the form to this address. Instead, see **Where to file** on this page.