



LOAN APPLICATION PACKAGE

- 1. Loan Application**
- 2. Strategy Letter**
- 3. Investor Experience & Portfolio**
- 4. Credit Card Authorization Form**
- 5. Bank Statements - 2 months most recent (all pages with name & account # visible)**
- 6. Copy of Photo ID - Passport OR Driver's License**
- 7. Copy of Insurance policy or Insurance agent - name, email, phone**
- 8. LLC / Corporation Documentation (if holding title in entity)**
 - a. Articles of Organization / Incorporation**
 - b. Operating Agreement if LLC / Bylaws if Corp**
 - c. EIN or Tax ID Number**
- 9. Specific Transaction Documents**
 - a. If purchase transaction – fully executed, valid purchase contract and addendum(s)**
 - b. If refinance transaction – payoff demand or mortgage statement**
- 10. If property requires rehab – provide rehab bid/itemized list of work w/ associated costs on scope of work form**
- 11. If property is currently leased, provide:**
 - a. Executed lease agreement(s)**
 - b. Rent roll and P&L statement for subject property (if multi-family)**

Please email completed loan package to UnderWriting@TSPFinancialGroup.com

LOAN APPLICATION - Borrower Details

BORROWER / AUTHORIZED SIGNER INFORMATION

Individual's Name: _____ Marital Status: Married Unmarried Separated

Primary Residence Address: _____

City: _____ State: _____ Zip Code: _____

Do you own or rent your primary residence: Own Rent Number of years at primary residence? _____

Mailing Address (if different from primary residence): _____

Primary Phone Number: _____

Secondary Phone Number: _____

Email Address: _____

Date of Birth: _____

Social Security Number: _____

Employment Information

Self-Employed: Yes No

Employer Name: _____

Position & Title: _____

Employer Address: _____

CO-BORROWER / AUTHORIZED SIGNER INFORMATION (if applicable)

Individual's Name: _____ Marital Status: Married Unmarried Separated

Primary Residence Address: _____ Married to Borrower? Yes No

City: _____ State: _____ Zip Code: _____

Do you own or rent your primary residence: Own Rent Number of years at primary residence? _____

Mailing Address (if different from primary residence): _____

Primary Phone Number: _____

Secondary Phone Number: _____

Email Address: _____

Date of Birth: _____

Social Security Number: _____

Employment Information

Self-Employed: Yes No

No Employer Name: _____

Position & Title: _____

Employer Address: _____

DECLARATIONS / QUESTIONNAIRE

<i>Please check YES or NO for each of the following questions</i>	Borrower		Co-Borrower	
	Yes	No	Yes	No
Are there any outstanding judgements against you?				
Have you been declared bankrupt within the last seven (7) years?				
Have you or any other entity of which you were/are a principal been in foreclosure or had any property that was foreclosed upon?				
Are you party to lawsuit?				
Are you presently delinquent on any federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?				
Have you ever been convicted of a felony?				
Are you in a Civil Union or a Domestic Partnership, or do you have a non-borrowing spouse, or are you a party to a Designated Beneficiary Agreement?				
Are you a US citizen?				
Are you a permanent resident alien?				
Do you intend to occupy the property as your primary residence?				

FINANCIAL STATEMENT

Estimated Total Annual Income	\$	Estimated Current Liquid Assets: <small>(cash or can be converted to cash within 30 days)</small>	\$
Cash in Bank	\$	Real Estate Owned	\$

LOAN APPLICATION - Transaction Details

SUBJECT PROPERTY INFORMATION

Subject Property Address: _____

City: _____ State: _____ Zip: _____

Property Type: _____ Number of Units: _____ Occupancy: Leased Vacant

Cross-Collateralization: Yes No If YES, # of properties: _____ (Provide all addresses on a separate spreadsheet)

LOAN REQUEST INFORMATION

Transaction Type: Purchase Rate & Term Refinance Cash-Out Refinance

Loan Amount Requested: \$ _____ Loan Term Request: 1 Year 2 Year 3 or 4 Year

Purchase Price: \$ _____ Estimated Property Value: \$ _____

If refinance, complete the following: Current debt on property: \$ _____ Original Cost: \$ _____
Year Acquired: _____ Amount of rehab completed (if any): \$ _____

BORROWER / ENTITY INFORMATION

Title will be held in what name(s): _____

Type: LLC Corporation Personal Name Limited Partnership

INTERIOR ACCESS CONTACT INFORMATION FOR SUBJECT PROPERTY

Contact Name: (or lock box number)	Phone Number:
Relationship:	Email:

ESCROW / CLOSING COMPANY INFORMATION

Company Name:	Phone Number:
Closing Agent:	Email:

DECLARATION OF NON-OWNER OCCUPANCY & BUSINESS USE OF PROCEEDS

I ("Borrower") certify and represent to lender ("Originator") as follows:

I hereby declare that I have no intention of making the property (subject property listed in my loan application) my principal residence.

Additionally, I declare that I have no intention of utilizing the property as a second home and/or any surviving spouse or family member shall live in the property. I understand that this loan is a business purpose loan and not a household purpose loan. The loan proceeds are intended to be used and shall be used for business purpose only, not for personal use.

I represent that I understand the difference between consumer loan for personal purposes and a commercial loan for business purposes. I represent that this loan is not a consumer loan and therefore is not subject to any laws relating to consumer loans under any state or federal laws such as Truth in Lending Act (15 U.S.C. § 1601 *et seq.*), Real Estate Settlement Procedures Act (12 U.S.C. § 2601 *et seq.*), Gramm-Leach Bliley Act (15 U.S.C. §§ 6802-6809), Secure and Fair Enforcement Mortgage Licensing Act (12 U.S.C. § 5101 *et seq.*), and Homeowners Protection Act (12 U.S.C. § 4901 *et seq.*).

I realize the lender, broker, assignees and successors rely upon this information. I confirm I have read and understand this document. I declare under penalty of perjury the foregoing is true and correct.

AUTHORIZATION TO CONDUCT CREDIT & BACKGROUND CHECK

By signing this form, I/we hereby authorize lender to conduct a background and/or credit check. Additionally, the undersigned and each party to this loan, authorizes lender to disclose to any third party, employee, agent or assignee thereof information regarding background and credit experience.

I understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of title 18, United States code, 1014. I also understand that the lender intends to use the data obtained through the investigation for due diligence purposes only, and shall not disclose such information to any other party except as otherwise authorized above.

Entity / Company Name (if applicable)

Borrower / Authorized Signer Name (print)

X _____
Signature (Borrower / Authorized Signer) Date

Co-Borrower / Authorized Signer Name (print)

X _____
Signature (Co-Borrower / Authorized Signer) Date

STRATEGY LETTER

1. I understand that I am applying for a non-owner occupied, business purpose investment loan. Yes No

2. What is your plan for this property? Fix & Flip Rental Bridge Other

3. If Fix & Flip, what do you anticipate your hold time to be? _____ months

4. If Fix & Flip, what do you estimate the ARV (after repair value) to be: \$ _____

5. If Rental Property, the monthly rental income is / will be: \$ _____

6. Explain your investment strategy for this property in detail:

7. What is your exit strategy and how do you intend to repay this loan? Sell Property Refinance Other - Please explain in detail

8. If cash-out refinance, how do you intend to use the cash-out proceeds? Please explain in detail.

9. Do you intend to rehab or upgrade the subject property? Yes No

If YES, what do you estimate your construction, rehab, and/or updating costs will be? Please explain in detail the scope of work. (If costs exceed \$10,000, please provide an itemized rehab bid / outlined scope of work with your submission)

Entity / Company Name (if applicable)

Borrower / Authorized Signer Name (print)

X _____
Signature (Borrower / Authorized Signer) Date

Co-Borrower / Authorized Signer Name (print)

X _____
Signature (Co-Borrower / Authorized Signer) Date

SCOPE OF WORK

Please fill out any fields in blue

Full Property Address	
# weeks to complete	
Total Cost (\$)	

Narrative description of the scope of work for your rehab. Please provide insight into the quality of interior finishes, any room/home conversions, any square footage adds, and any relevant redesign(s). The level of detail will impact the accuracy of your After-Repair Valuation:

Current Structure

Square Footage	
Property Type	
# of Bedrooms	
# of Baths	

Proposed Rehabbed Structure

Square Footage	
Property Type	
# of Bedrooms	
# of Baths	

DrawItem	DrawDescription (Finishes utilized and description of work)	DrawBudget (\$ Amount)	Column1
Plans/Permits			
Demolition			
Foundation			
Framing			
Electrical			
Plumbing			
HVAC			
Roof			
Siding/Ext. Composition			
Windows			
Paint			
Drywall			
Patio/Deck			
Pool			
Kitchen			
Appliances			
Counter Tops			
Baths			
Fixtures/Vanity/Hardware			
Flooring			
Landscaping			
Driveway			
Fence			
Other			
hot water heater			
contingency			
		Total=	\$

