



Loan Registration Form

Form is fillable in Adobe Acrobat

Please complete this form and email with the following attachments to your Account Executive or to INFO@ACMSCORP.com (one will be assigned):

Loan Registration Form

Current Rent Roll (Yours or use the attached form)

Last two years and YTD property operating statements (Yours or use the attached form)

Purchase Contract (if applicable)

Note: If these items are not included we will not be able to review your loan request or issue a Letter of Interest

Broker Information

| | |
|--------------------|--------------------------|
| Company _____ | Loan Officer Email _____ |
| Loan Officer _____ | Loan Officer Phone _____ |

Why is Borrower seeking this financing? Any special problems or issues?

Borrower Information

| | Name of Borrower or Guarantor | Borrower or G'tor w/ Ownership % | Liquidity | Net Worth | Est. Credit Score |
|----|-------------------------------|----------------------------------|-----------|-----------|-------------------|
| #1 | _____ | B G _____ | _____ | _____ | _____ |
| #2 | _____ | B G _____ | _____ | _____ | _____ |
| #3 | _____ | B G _____ | _____ | _____ | _____ |
| #4 | _____ | B G _____ | _____ | _____ | _____ |

| | | | | | |
|-----|----|--|-----|----|--|
| Yes | No | Previous foreclosures in last 3 years? | Yes | No | Any borrowers or guarantors foreign nationals? |
| | | Chapter 7 or 13 in last 5 years? | | | Mortgage payments current over last 12 months? |
| | | Borrowers / guarantors filed tax returns for last 3 years? | | | Back taxes owed on subject property? |

Property Information

| | | | | | |
|--------------------------|------------------|-------------------|-----------------------|-------------|--------------|
| Address _____ | _____ | | <u>Property Type:</u> | | |
| City _____ | State _____ | _____ | Multifamily | Retail | Mixed Use |
| Building SF _____ | # of Units _____ | Occupancy % _____ | Industrial | Office | Self Storage |
| Occupancy Investor _____ | Owner _____ % | _____ | Mobile Homes | Other _____ | _____ |

Loan Information

| | |
|------------------------------------|------------------------------------|
| Loan Amount Requested _____ | Annual Gross Income _____ |
| Desired Rate _____ AM _____ (mos.) | Annual Operating Expense _____ |
| Current Estimated Value _____ | Annual Net Operating Income _____ |
| Monthly Pmt _____ | Annual Pmt _____ |
| | LTV _____ DCR _____ CAP Rate _____ |

*Type in Loan Amount, Desired Rate, Gross Income and Expense to generate payment and DCR

Purchase

| |
|---|
| Current Sales Price _____ |
| Target Closing Date _____ |
| Second or Seller Financing Yes \$ _____ |
| 1031 Exchange? Yes |

Rate & Term Refi

| |
|--|
| Current Loan Balance _____ |
| Loan Maturity Date _____ Pre-pay? Yes |
| Current Lender _____ |
| Current Interest Rate _____ Year Purchased _____ |
| Original Purchase Price _____ |

Cash Out Refi

Comments - What is the pertinent story behind this transaction?



Property Operating Statement

Property Street Address

| |
|--|
| |
|--|

| | | |
|-------------|--------------|------------|
| City | State | Zip |
|-------------|--------------|------------|

| | | |
|--|--|--|
| | | |
|--|--|--|

| Annual Income | 2nd Year Prior | Prior Year | Current Year | | Mos. |
|---------------|----------------|------------|--------------|--|------|
|---------------|----------------|------------|--------------|--|------|

| | | | | | |
|-------------------------|--|--|--|--|--|
| Rental Income Collected | | | | | |
|-------------------------|--|--|--|--|--|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

| | | | | | |
|-------------------------------|--|--|--|--|--|
| Total Income Collected | | | | | |
|-------------------------------|--|--|--|--|--|

| Annual Expenses | 2nd Year Prior | Prior Year | Current Year |
|-----------------|----------------|------------|--------------|
|-----------------|----------------|------------|--------------|

Do not include one time capital expense items

| | | | |
|-------------------|--|--|--|
| Real Estate Taxes | | | |
|-------------------|--|--|--|

| | | | |
|-----------|--|--|--|
| Insurance | | | |
|-----------|--|--|--|

| | | | |
|-----------|--|--|--|
| Utilities | | | |
|-----------|--|--|--|

| | | | |
|-----|--|--|--|
| Gas | | | |
|-----|--|--|--|

| | | | |
|-------------|--|--|--|
| Electricity | | | |
|-------------|--|--|--|

| | | | |
|-------------|--|--|--|
| Water/Sewer | | | |
|-------------|--|--|--|

| | | | |
|-------|--|--|--|
| Trash | | | |
|-------|--|--|--|

| | | | |
|-------------|--|--|--|
| Maintenance | | | |
|-------------|--|--|--|

| | | | |
|--------------|--|--|--|
| Pest Control | | | |
|--------------|--|--|--|

| | | | |
|----------|--|--|--|
| Gardener | | | |
|----------|--|--|--|

| | | | |
|--------------|--|--|--|
| Pool Service | | | |
|--------------|--|--|--|

| | | | |
|----------|--|--|--|
| Elevator | | | |
|----------|--|--|--|

| | | | |
|------------------|--|--|--|
| Cleaning Service | | | |
|------------------|--|--|--|

| | | | |
|------------------------|--|--|--|
| Building Rep. & Maint. | | | |
|------------------------|--|--|--|

| | | | |
|-----------------------|--|--|--|
| Painting & Decorating | | | |
|-----------------------|--|--|--|

| | | | |
|----------|--|--|--|
| Supplies | | | |
|----------|--|--|--|

| | | | |
|----------------|--|--|--|
| Administration | | | |
|----------------|--|--|--|

| | | | |
|----------------|--|--|--|
| Administrative | | | |
|----------------|--|--|--|

| | | | |
|-------------|--|--|--|
| Advertising | | | |
|-------------|--|--|--|

| | | | |
|-----------|--|--|--|
| Telephone | | | |
|-----------|--|--|--|

| | | | |
|---------------|--|--|--|
| Miscellaneous | | | |
|---------------|--|--|--|

| | | | |
|------------------|--|--|--|
| Resident Manager | | | |
|------------------|--|--|--|

| | | | |
|----------|--|--|--|
| Security | | | |
|----------|--|--|--|

| | | | |
|---------------------|--|--|--|
| Off-Site Management | | | |
|---------------------|--|--|--|

| | | | |
|-------|--|--|--|
| Other | | | |
|-------|--|--|--|

| | | | |
|-----------------------|--|--|--|
| Total Expenses | | | |
|-----------------------|--|--|--|

| | | | |
|-----------------------------|--|--|--|
| Net Operating Income | | | |
|-----------------------------|--|--|--|

Comments or Explanations:

| |
|--|
| |
|--|