

COMMERCIAL REAL ESTATE Financing Application

Please fill out the following information for the property you are planning to use as collateral and **fax** to **212-658-9717**. You may also email it to **info@advancedfundingsolutionsllc.com**. If available, also include pictures of the property, appraisals, purchase contracts, broker value opinions, copy of personal credit reports, title work, environmental studies, a personal financial statement, 1003 Application or any other information you have that may be pertinent.. Applications must be complete and include direct contact information for the borrower to be considered. (Please write clearly in **CAPITAL** letters)

BORROWER NAME					
PROPERTY ADDRESS		CITY, STATE, ZIP		EMAIL	
TELEPHONE #1		TELEPHONE #2		FAX	
PROPERTY DESCRIPTION		LOT AREA	BUILDING AREA (SQ. FT.)		# FLOORS
VALUE ESTIMATE (SOURCE): \$		LOAN REQUEST: \$	# UNITS	DATE PURCHASED (IF REFI)	
TERMS REQUESTED				OWNER OCCUPANCY %	
PURCHASE OR REFINANCE:		SUBMITTED BY		TELEPHONE	
SOURCES & USES OF FUNDS DESCRIPTION					
ADDITIONAL COMMENTS					
PROPERTY TYPE:	<input type="checkbox"/> LIGHT INDUSTRIAL	<input type="checkbox"/> APARTMENTS	<input type="checkbox"/> FUNERAL HOME	<input type="checkbox"/> MOBILE HOME	<input type="checkbox"/> STRIP MALL
	<input type="checkbox"/> MIXED USE	<input type="checkbox"/> AUTO SALES OR SVC	<input type="checkbox"/> GOLF COURSE	<input type="checkbox"/> MOTEL	<input type="checkbox"/> SELF STORAGE
<input type="checkbox"/> CAR WASH	<input type="checkbox"/> RESTAURANT	<input type="checkbox"/> BED & BREAKFAST	<input type="checkbox"/> HOTEL	<input type="checkbox"/> MULTI FAMILY	<input type="checkbox"/> WAREHOUSE
<input type="checkbox"/> CONDOMINIUMS	<input type="checkbox"/> RETAIL	<input type="checkbox"/> CAMPGROUND	<input type="checkbox"/> HEAVY INDUSTRIAL	<input type="checkbox"/> OFFICE	<input type="checkbox"/> LAND

SPACE	TENANT	SQ FT	LEASE START	LEASE END	BASE RENT	ESCALATIONS

** Remember to identify vacant spaces and list their values.*

INCOME

 TOTAL BASE RENT: \$ _____
 TOTAL ESCALATIONS: \$ _____

TOTAL INCOME: \$ _____

EXPENSES

 UTILITIES: \$ _____
 REPAIRS & MAINTENANCE: \$ _____
 TAXES: \$ _____
 INSURANCE: \$ _____
TOTAL EXPENSES: \$ _____