



Please fax to 214.292.1071

### Construction Application

#### Applicants Information

Name of Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_--\_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Entity Type:  Corp.  Partnership  LLC  Sole Proprietor

Owner Name: \_\_\_\_\_ Owner %: \_\_\_\_\_ Credit Score: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner % \_\_\_\_\_ Credit Score: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner % \_\_\_\_\_ Credit Score: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner % \_\_\_\_\_ Credit Score: \_\_\_\_\_

Years in Business under this entity: \_\_\_\_\_

Total Liquid Assets: \_\_\_\_\_



#### Loan Information

Construction Type:  Town House  Condo Project  Office  Sub Division  Mixed Use  
 Apartments  Hotel/Motel  Other

Status of Land:  Owned  Under Contract  TBD

Property Purchase Date: \_\_\_\_\_ Purchase Price: \_\_\_\_\_

Liens on Property: \_\_\_\_\_ Estimated Land Value: \_\_\_\_\_

Total Project Costs: \_\_\_\_\_

Estimated Value of Completed Project: \_\_\_\_\_

Estimate Labor Improvements Costs: \_\_\_\_\_



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Estimate Material Improvements Costs: \_\_\_\_\_

Total Invested Into Project: \_\_\_\_\_

**Submission Documents**

- |  |   |  |
|--|---|--|
| 3 Years Business Tax Returns <input type="checkbox"/>  | 3 years Personal Tax Returns <input type="checkbox"/> | Executive Summary <input type="checkbox"/> |
| Business Financial Statements <input type="checkbox"/> | Credit Report(s) <input type="checkbox"/>             | Line Item <input type="checkbox"/>         |
| Total Cost Budget <input type="checkbox"/>             | Vertical Cost Schedule <input type="checkbox"/>       | Contractor Bids <input type="checkbox"/>   |
| Permit(s) <input type="checkbox"/>                     | Environmental Studies <input type="checkbox"/>        | Profit & Loss <input type="checkbox"/>     |
| Purchase Contract (Land) <input type="checkbox"/>      | Articles of Incorporation <input type="checkbox"/>    |  |

**First Lien Information**

First Lien Approval Obtained  Yes  No

Lender/Bank: \_\_\_\_\_

Loan Officer Name: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

First Lien Type  Conventional  Hard Money  Other

First Lien Loan Amount: \_\_\_\_\_ Estimated Closing Date: \_\_\_\_\_

First Lien Interest Rate: \_\_\_\_\_ Term of Loan: \_\_\_\_\_

Fixed  Yes  No Prepay  Yes  No Assumable  Yes  No



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**Broker Information**

Broker Company: \_\_\_\_\_ Loan Officer: \_\_\_\_\_

Contact Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Fax Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Method of Contact  Phone  Email

Alternate Contact Person: \_\_\_\_\_

Alternate Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Signed Fee Agreement  Yes  No



**Signature**

Name (Signed): \_\_\_\_\_ Date: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_