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Send to: submissions@keycl.com Fax: [866-520-2629](tel:866-520-2629)

APPLICANT / TRANSACTION INFORMATION

Applicant(s) Name: _____ Business Name _____

Applicants Net Worth: _____ Applicants Credit Score: _____ Applicants Liquidity: _____

Applicants Personal Residence City: _____ State: ____ Contact # _____

Loan Amount Requested: _____ Past Foreclosure / Bankruptcy: YES NO

Loan Purpose: Purchase Rate/Term Refi Cash-Out Refi Small Business Administration (SBA)

For SBA Loans, please check transaction type: Acquisition Expansion/Working Capital Refinance

If Purchase, Purchase Price: \$ _____ Source of Down Payment: _____

Loan Maturity Date: _____ Is property in foreclosure?: YES NO

If Refinance, Name of Lien Holder : _____ Current Interest Rate: _____

Outstanding Property Balance: \$ _____ Estimated Property Value \$ _____

Date Property was last transferred: _____ Name of Seller: _____

PROPERTY INFORMATION

Subject Property Address: _____ City: _____ State: ____ Zip: _____

Property Type Per Certificate of Occupancy:

Multifamily Residential 1-4 Unit Industrial Retail Office Self Storage Mixed Use Other

Does the owner occupy any portion of the property? Yes No

Building Sq Ft: _____ Number of Stories: _____

of Residential Apts: _____ # of Vacant: _____ # of Commercial/Retail Units: _____ # of Vacant: _____

Annual Gross Property Income: _____ Annual Operating Expense: _____

Please Sign Here X _____

