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5010 Nicholson Ln, Suite 100, Rockville, MD 20852 | (O) 301.825.9167 (F) 240.724.7628 | [amcfg.com](http://amcfg.com)

Thank you for choosing American Capital Financial Group, LLC!

This Commercial Loan Application will give us the information we need to create a customized financing solution that meets your real estate financing needs!

Again, thank you for choosing American Capital Financial Group, LLC. We are committed to earning your trust and confidence throughout this process, and we are here to help at any time. If you have questions, please don't hesitate to give us a call.

Sincerely,

American Capital Financial Group, LLC

Commercial Loan Application

I. Financing Request			
Amount of Financing Requested:		\$	
Purpose (check all that apply):		<input type="checkbox"/> Acquisition <input type="checkbox"/> Acquisition & Renovation <input type="checkbox"/> Refinance & Renovation <input type="checkbox"/> Acquisition of Note(s) ( <a href="#">complete Section IX</a> )	
The entity borrowing the requested funds will be:		<input type="checkbox"/> Individual(s) (Complete Section II, below) <input type="checkbox"/> Corporation (Complete Sections II & III, below)	
II. Individual			
Applicant Information			
Full Name:			
Other Name(s):			
Marital Status:			Gender:
Street Address:			
City:		State:	Zip:
Mobile Phone:		Email:	
Country of Citizenship:		Passport Number:	
Estimated FICO:	Date of Birth:		SSN:
Real Estate Experience (Applicant)			
Years of Real Estate Experience:			
# of Projects in past 2 Years:			
# of Active Rental Properties:			
II. Individual			
Co-Applicant Information			
Full Name:			
Other Name(s):			
Marital Status:			Gender:
Street Address:			
City:		State:	Zip:
Mobile Phone:		Email:	
Country of Citizenship:		Passport Number:	
Estimated FICO:	Date of Birth:		SSN:
Real Estate Experience (Co-Applicant)			
Years of Real Estate Experience:			
# of Projects in past 2 Years:			
# of Active Rental Properties:			

III. Background Questions				
	Applicant		Co-Applicant	
Within the past two years, have you filed for bankruptcy, been declared bankrupt, or involved in any kind of insolvency proceeding?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the undersigned been a party to a bankruptcy or insolvency proceeding with regard to any of the properties in which the undersigned has or had ownership or interest as guarantor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you (or any entity, any partner in a management or principal ownership role) ever been charged with or convicted of a criminal act?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of any crime involving fraud, financial malfeasance, or misrepresentation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you currently have any charges (pending) against you for a crime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a court or state agency ever denied you a contract or license, terminated, revoked, or suspended your contract or license, or have you ever given up a contract or license because a court agency was taking action against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been a party to a litigation in the last ten (10) years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently a party to any litigation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any outstanding judgements against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you owned the property (or an interest in property) which has been foreclosed upon?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you owned property (or an interest in a property) from which you have given title or deed in lieu of foreclosure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you currently owe any taxes for a year prior to current year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had any property repossessed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever obtained credit under any other name or have been known by any other name within the last ten (10) years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Applicant</b> - If you answered YES to any of the above questions, please describe and provide details: <div></div>				
<b>Co-Applicant</b> - If you answered YES to any of the above questions, please describe and provide details: <div></div>				

Personal Financial Statement

IV. Assets and Liabilities

Assets	Applicant	Co-Applicant	Liabilities	Applicant	Co-Applicant
Cash on hand and on deposit	\$	\$	Accounts Payable	\$	\$
Stocks and Bonds	\$	\$	Credit Cards	\$	\$
IRA and other Retirement Accounts	\$	\$	Notes Payable	\$	\$
Life Insurance Cash Surrender Value	\$	\$	Real Estate Mortgages	\$	\$
Accounts and Notes Receivable	\$	\$	Other Liabilities	\$	\$
Real Estate Owned	\$	\$			
Other Personal Property and Assets	\$	\$			
Totals Assets	\$	\$	Total Liabilities	\$	\$
			Net Worth	\$	\$

V. Cash Equivalents, Stocks and Bonds, and IRA or other Retirement Accounts

	Name of Institution	Account Type	Account Number	Current Balance
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$
<input type="checkbox"/> Borr <input type="checkbox"/> Co-Borr				\$

VI. Real Estate Owned (List or Attach REO Schedule)		
Property #1		
Residential: <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Residential 2-4 Units <input type="checkbox"/> Multi-family (5 or more units) <input type="checkbox"/> Condo (_____ floors)		
Commercial: <input type="checkbox"/> Office (____ floors) <input type="checkbox"/> Mixed Use <input type="checkbox"/> Light Industrial <input type="checkbox"/> Restaurant <input type="checkbox"/> Other:		
Street Address:		
City:	State:	Zip:
Original Cost: \$	Current Market Value: \$	
Vested Owner(s):		
Lender1 Name:	Mortgage1 Balance: \$	Maturity Date:
Lender2 Name:	Mortgage2 Balance: \$	Maturity Date:
This property owned by <input type="checkbox"/> Applicant <input type="checkbox"/> Co-Applicant		
Property #2		
Residential: <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Residential 2-4 Units <input type="checkbox"/> Multi-family (5 or more units) <input type="checkbox"/> Condo (_____ floors)		
Commercial: <input type="checkbox"/> Office (____ floors) <input type="checkbox"/> Mixed Use <input type="checkbox"/> Light Industrial <input type="checkbox"/> Restaurant <input type="checkbox"/> Other:		
Street Address:		
City:	State:	Zip:
Original Cost: \$	Current Market Value: \$	
Vested Owner(s):		
Lender1 Name:	Mortgage1 Balance: \$	Maturity Date:
Lender2 Name:	Mortgage2 Balance: \$	Maturity Date:
This property owned by <input type="checkbox"/> Applicant <input type="checkbox"/> Co-Applicant		
Property #3		
Residential: <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Residential 2-4 Units <input type="checkbox"/> Multi-family (5 or more units) <input type="checkbox"/> Condo (_____ floors)		
Commercial: <input type="checkbox"/> Office (____ floors) <input type="checkbox"/> Mixed Use <input type="checkbox"/> Light Industrial <input type="checkbox"/> Restaurant <input type="checkbox"/> Other:		
Street Address:		
City:	State:	Zip:
Original Cost: \$	Current Market Value: \$	
Vested Owner(s):		
Lender1 Name:	Mortgage1 Balance: \$	Maturity Date:
Lender2 Name:	Mortgage2 Balance: \$	Maturity Date:
This property owned by <input type="checkbox"/> Applicant <input type="checkbox"/> Co-Applicant		
Property #4		
Residential: <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Residential 2-4 Units <input type="checkbox"/> Multi-family (5 or more units) <input type="checkbox"/> Condo (_____ floors)		
Commercial: <input type="checkbox"/> Office (____ floors) <input type="checkbox"/> Mixed Use <input type="checkbox"/> Light Industrial <input type="checkbox"/> Restaurant <input type="checkbox"/> Other:		
Street Address:		
City:	State:	Zip:
Original Cost: \$	Current Market Value: \$	
Vested Owner(s):		
Lender1 Name:	Mortgage1 Balance: \$	Maturity Date:
Lender2 Name:	Mortgage2 Balance: \$	Maturity Date:
This property owned by <input type="checkbox"/> Applicant <input type="checkbox"/> Co-Applicant		

VII. Business Information									
Legal Name of Business:									
Trading as (if different than legal name):									
Business Type:		<div><input type="checkbox"/> LLC   <input type="checkbox"/> Sole   <input type="checkbox"/> Limited Partnership   <input type="checkbox"/> General Partnership   <input type="checkbox"/> C Corp   <input type="checkbox"/> S Corp</div> <div><input type="checkbox"/> Other (please describe):</div>							
State in which Registered:				Tax ID:			Date Business Established:		
Street Address:									
City:					State:		Zip:		
Telephone:					Fax:				
Annual Gross Sales: \$					Annual Net Profit: \$				
VIII. Ownership Information									
Complete the table below. Ownership interest(s) must total 100%.									
Owner 1									
Name:									
Position/Title:							% Ownership:		
Street Address:									
City:				State:		Zip:			
SSN:			DOB:				US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mobile Phone:			Email:						
Owner 2									
Name:									
Position/Title:							% Ownership:		
Street Address:									
City:				State:		Zip:			
SSN:			DOB:				US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mobile Phone:			Email:						
Owner 3									
Name:									
Position/Title:							% Ownership:		
Street Address:									
City:				State:		Zip:			
SSN:			DOB:				US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mobile Phone:			Email:						
Owner 4									
Name:									
Position/Title:							% Ownership:		
Street Address:									
City:				State:		Zip:			
SSN:			DOB:				US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mobile Phone:			Email:						

IX. Information About Subject Property and Project		
<div><div><input type="checkbox"/> Purchase</div><div><input type="checkbox"/> Purchase &amp; Reno</div><div><input type="checkbox"/> Purchase &amp; Construction (complete Sections A &amp; B, plus D if Reno or Const)</div><div><input type="checkbox"/> Refinance</div><div><input type="checkbox"/> Refinance &amp; Reno (complete Sections A &amp; C, plus D if Reno or Const)</div><div><input type="checkbox"/> Acquisition of Note(s) (complete Sections A &amp; E)</div></div>		
Occupancy Status: <input type="checkbox"/> Leased <input type="checkbox"/> Vacant <input type="checkbox"/> New Construction		
Total Applicant(s') funds to be put into this Project: \$		
Section A: For Purchase and Refinances, please fill in the property information below		
Property Type:	Residential: <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Residential 2-4 Units <input type="checkbox"/> Multi-family (5 or more units) <input type="checkbox"/> Condo (____ floors) Commercial: <input type="checkbox"/> Office (____ floors) <input type="checkbox"/> Mixed Use <input type="checkbox"/> Light Industrial <input type="checkbox"/> Other:	
Complete street address (No PO Boxes permitted). If this Project spans more than one address, please include with this Application a separate document listing all the addresses.		
Street Address:		
City:	State:	Zip:
Section B: Complete this Section for Purchases		
Sale Price: \$		Settlement Date:
If this is an REO or Short Sale, do you have an active agreement with the current lender(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Section C: Complete this Section for Refinances		
Date Acquired:	Purchase Price: \$	Current Value (est): \$
Current Bal Mortgage 1: \$		
Current Bal Mortgage 2: \$		
Brief Project description:		
Section D: Complete this Section for Projects Involving Renovation or Construction		
Describe the renovation work being proposed:		
<div>Estimated Project Development Costs</div> <div>Purchase Price (from above): \$ Renovation &amp; Construction Costs: \$ Total Development Costs: \$ Total Money Spent on Renovation to-date: \$ Estimated Appraised Value (upon completion of renovation work:): \$</div>		
Section E: Complete this Section for Acquisition of Note(s)		
Estimated length of time funds will be needed: months		
Total Purchase Price: \$		Amount you will put down: \$
What is your intent with regards to this property?	<div><input type="checkbox"/> (a) Buy and hold</div> <div><input type="checkbox"/> (b) Buy and sell</div> <div><input type="checkbox"/> (c) Buy and foreclose. If you foreclose, will you bid at the foreclosure sale? <input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div>If (a) or (b), how much renovation work will this property require to be leaseable/marketable? \$</div>	
Current Bal Mortgage 1: \$	Signed Purchase Agreement with this lender? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Bal Mortgage 2: \$	Signed Purchase Agreement with this lender? <input type="checkbox"/> Yes <input type="checkbox"/> No	



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**Credit and Background Check Authorization**

As part of our underwriting process, American Capital Financial Group, LLC (AMCFG) conducts a full background and credit check on all Applicants in order to determine eligibility for a business loan and to verify the information you provide to us on your application. Your signature on this form provides your authorization for these checks to be conducted. Upon request, American Capital Financial Group, LLC will provide you with the name and address of the Consumer Reporting Agency contacted to supply the credit report. By signing this form, you understand that credit inquiries have the potential to impact your credit score.

- By signing below, I authorize American Capital Financial Group, LLC, or any of its duly authorized agents to:
- Obtain and use credit reports and background information on all Applicants in connection with my Commercial Loan Application and any update, renewal, account review, or extension that American Capital Financial Group, LLC may require.
  - Make employment or other investigation inquiries it deems necessary in connection with this Commercial Loan Application.

The undersigned understands and acknowledges that, (1), this document is being utilized in connection with an application for a loan, and, (2) it is a Federal crime, punishable by fine or imprisonment, or both, to knowingly make any false statements in connection with an application for a loan, as applicable under provisions of Title 18, United States Code, Section 1014.

The undersigned agrees to promptly notify of any material changes in financial condition of the undersigned, including incurring additional indebtedness, liabilities, or other financial obligations. The undersigned will promptly notify American Capital Financial Group, LLC of any legal or foreclosure proceeding which they are a party to, or any personal or business-related reduction in assets or any event that could cause a reduction in assets, from the time of this application through disbursement of any and all loan proceeds.

I understand and agree that American Capital Financial Group, LLC will retain this application and any other credit information we receive, even if no loan or credit is granted.

**NOTE:** The closing entity on any property loan must be identical to the entity and ownership information that was initially approved by American Capital Financial Group, LLC.

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Applicant

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Co-Applicant

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Business Owner 1

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Business Owner 2

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Business Owner 3

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Business Owner 4