Date of Statement:

Applicant			Co-Applicant			
Name			Name			
Home Address			Home Address			
Email			Email			
Phone	SSN	DOB	Phone	SSN	DOB	

Please indicate ownership of assets: J=Joint: A=Applicant: C=Co-Applicant

Assets	Amount(s)	Liabilities	Amount(s)	
Cash and Depository Accounts (Sch. A)		Accounts Payable		
Stocks and Bonds (Sch. B)		Life Insurance Loans (Sch. D)		
IRA, Keogh, Profit Sharing/SEP's, etc. (Sch. C)		Unsecured Loans (Including Credit Cards)		
Net Cash Value of Life Insurance (Sch. D)		Vehicle Loans		
Residential Real Estate (Sch. E)		Residential Mortgage Debt (Sch. E)		
Commercial Real Estate (Sch. F)		Commercial Mortgage Debt (Sch. F)		
Business Interests (Sch. G)		Business Interests Debt (Sch. G)		
Accounts and Notes Receivable		Margin Accounts		
Vehicles		Taxes Payable		
Personal Property		Student Loan Debt		
Other Assets (list)		Other Liabilities (List)		
		Total Liabilities		
		Net Worth		
Total Assets		Total Liabilities & Net Worth		

Contingent Liabilities (Liability as guarantor or cosigner for loans of others)					
Borrower (*attach a separate sheet with detail, if necessary)	Current Balance	Monthly Payment			

Schedule A – Cash and Depository Accounts (Attach separate sheet if necessary)					
Depository Institution	Owner(s)	Average Amount			

Schedules B & C – Stocks and Bonds, IRA, Keogh, Profit Sharing (Attach separate sheet if necessary)							
Description	Owner	Where Held	Market Value	Pledged? (Y/N)			

Schedule D – Life Insurance						
Insurance Company	Face Amount	Beneficiary	Cash Surrender Value			

Schedule E – Residential Real Estate Owned (Attach separate sheet if necessary)							
Property Address	% Owned	Purchase Price	Market Value	Loan Balance	Monthly Payment	Lender	
		Thee			rayment		

Schedule F – Commercial Real Estate Owned (Attach separate sheet if necessary)							
Owner	Address	Purchase	Market	Loan Balance	Monthly	Lender	
		Price	Value		Payment		

Schedule G – Business Interests (Attach separate sheet if necessary)							
Business Name	Legal Structure	% Owned	Annual Income	Total Assets	Total Liabilities		

Additional Questions: Please answer Yes or No where applicable					
1.	Income tax returns filed through (year):				
2.	Are any returns currently being audited or contested? If yes, what year(s):				
3.	Are any of your tax obligations past due? If yes, what amount:				
4.	Have you or any business that you were a major owner ever declared bankruptcy? If yes, include explanati				
5.	Are there any lawsuits or legal actions pending against you or an affiliated company?				
6.	Have you drawn a will? Name of executor(s):				

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that the Lender will rely on this information when making decisions regarding an application for a loan. I authorize the Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

Signature	Print Name	Date
Signature	Print Name	Date