

PREAPPLICATION QUALIFYING/PRICING QUESTIONS:

Affiliates & Originators: Don't waste your time, or mislead a customer, by submitting their application for funding for which they cannot qualify or afford. Ask & answer these questions & submit this sheet together with the initial funding inquiry, so that Quest Funding Services can prequalify customer for the most appropriate funding option.

Ref	QUESTIONS FOR OWNER OCCUPANTS/MANAGERS	ANSWERS
1	If Purchase-Purchase Price	
2	If Purchase-Targeted Closing Date	
3	If Refinance-Purchase Price when bought by borrower	
4	If Refinance-Purchase date for this borrower	
5	If Refinance-Approximate Current Value	
6	If Refinance-Total Amount of All Current Liens on Subject Property	
7	Property Type-Office, Warehouse, Strip Center, Industrial, SFR Conversion, Mixed Use, School, Day Care, Auto Service, Funeral Home, Retail Store, Salon, Spa, Laundromat, Dry-Cleaner, Metal Building, Golf Club, Bowling Alley, Restaurant, Other	
8	Property Location (City and State)	
9	Loan Amount Request (75%-90% LTV for purchase or 55%-65% for REFI)	
10	Nature of Business Using The Property (Owner of property Controls Business)	
11	Gross Company Revenue (Owner Occupied Tenant) as Reported on Recent Tax Return	
12	Net Company Profit (Owner Occupied Tenant) as Reported on Recent Tax Return	
13	Experian (only) FICO of all Guarantors (650 MIN/720 for Construction)	
Ref	QUESTIONS FOR NON-OWNER OCCUPANTS/MANAGERS	ANSWERS
1	If Purchase-Purchase Price	
2	If Purchase-Targeted Closing Date	
3	If Refinance-Purchase Price when bought by borrower	
4	If Refinance-Purchase Date for this borrower	
5	If Refinance-Approximate current value	
6	If Refinance-Total Amount of all Current liens on subject property	
7	Property Type-Office, Warehouse, Strip Center, Industrial, SFR Conversion, Mixed Use, School, Day Care, Auto Service, Funeral Home, Retail Store, Salon, Spa, Laundromat, Dry-Cleaner, Metal Building, Golf Club, Bowling Alley, Restaurant, Other	
8	Property Location (City and State) (NOO not available in all states)	
9	Loan Amount Requested (65% for multiuse or 55% to 60% for special use)	
10	Nature of Business of Primary Tenant--if one tenant occupies over 45% of space	
11	Gross Annual Rents as collected in current tax return and verified on tax return	
12	Owner Paid Operating Expenses for most recent tax year (do not include depreciation/interest)	
13	Experian (only) FICO of all Guarantors (650 MIN/720 Construction)	
Ref	QUESTIONS FOR CONSTRUCTION OR REHAB LOANS	ANSWERS
1	Original cost of land or property with purchased by borrower	
2	Actual costs of capital improvements made (and paid) since purchase	
3	Estimated costs of pending improvements (and unpaid improvements)	
Fill in & Email, with Initial Inquiry Form to: inbox@questfunding services.us		

Broker Contact Information: _____

Affiliate/Originator: _____ Contact Info: _____

Applicant Name: _____ Property: _____



Commercial Funding Submission & Checklist

Submission Date: ___ - ___ - ____

www.questfundingservices.us

Submit Completed Form to: inbox@questfundingservices.us

#	Have	Req.	Date Recvd	Documentation Item Description:	Limited Doc Requested <input type="checkbox"/>
1.	<input type="checkbox"/>	<input type="checkbox"/>		Color photos of subject property: Front, rear, L & R street scene, repr. inside (6-8 pics).	
2.	<input type="checkbox"/>	<input type="checkbox"/>		Rent Roll: Names, rent, Mkt. Rent, exp. dates, deposits, unit description (BR, Sq Ft), etc.	
3.	<input type="checkbox"/>	<input type="checkbox"/>		Last 2-3 years income & expense statements, along with a year-to-date profit & loss.	
4.	<input type="checkbox"/>	<input type="checkbox"/>		Last 2-3 years personal & business tax returns. If self-employed, need year-to-date P & L.	
5.	<input type="checkbox"/>	<input type="checkbox"/>		Personal & business financial statements showing assets and liabilities.	
6.	<input type="checkbox"/>	<input type="checkbox"/>		If Available: Existing Appraisal & BPO/Comps; Credit reports;	
7.	<input type="checkbox"/>	<input type="checkbox"/>		For Rehab/Construction Funding: Complete cost breakdown including monies invested.	
8.	<input type="checkbox"/>	<input type="checkbox"/>		Purchase: Copy of purchase agr. , escrow instructions, evidence of earnest money deposit.	
9.	<input type="checkbox"/>	<input type="checkbox"/>		Exec. Summary, or bus plan, w/ management team & experience, exit strategy, use of funds	
10.	<input type="checkbox"/>	<input type="checkbox"/>		Copies of any & all corporation by-laws, partnerships, operating or trust agreements.	
11.					

Source: _____ (Affiliate/Broker) Telephone: _____ Fax: _____
 (Contact)

Borrower: _____ Contact Info: _____

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

TRANSACTION DATA: (Minimum loan amounts vary with each loan program, doc type, borrower assets & credit, etc.)

Expected Funding: ___ Full Doc, Conv. Comm'l ___ HUD ___ SBA ___ Alternative ___ Hard Money **Initial Inquiry Only**
 ___ Purchase ___ Refinance ___ Construction ___ Bridge Loan ___ Mezzanine/2nd ___ Other _____

Sales Price or Total Cost \$ _____ Date Acquired ___/___/_____
 Cash Down or Monies Invested \$ _____ Original Cost \$ _____
 Source of Down Payment _____ Estimated Value (As Is) \$ _____
 Rehab/Construction Cost \$ _____ Estimated Value (Finished) \$ _____
 Amount of Payoffs 1st \$ _____ 2nd \$ _____ Other, explain \$ _____
 Anticipated Settlement Date ___/___/_____
 Requested Loan Amount: \$ _____ Misc Comment: _____
 Requested Loan Term: _____ Years Requested Amortization Term: _____ Years

Loan purpose overview: _____

DESCRIPTION OF PROPERTY:

___ Apartment ___ Office ___ Retail ___ Hotel ___ Industrial ___ Self Storage ___ Other: _____

Total Sq. Ft. _____ Net Rentable Sq. Ft. _____ Vacant Sq. Ft. _____ %
 Year Built _____ # of Stories: _____ # of Total Units _____
 Elevator Served _____ # of Unit's Vacant _____ # of Parking Spaces _____
 Enclosed Parking? _____ Common Area Size, Descr: _____

Occupation & Exit Strategy: ___ Owner-Occupied ___ N/O/O Hold/Rent Sell

Utilities: Master ___ Gas ___ Electricity ___ Water ___ Sewer ___ Cable/DSL
 Individual ___ Gas ___ Electricity ___ Water ___ Sewer ___ Cable/DSL

Multi-Family Details:

_____ 1 BDRM _____ Baths _____ Type Sq. Ft.
 _____ 2 BDRM _____ Baths _____ Type Sq. Ft.
 _____ 3 BDRM _____ Baths _____ Type Sq. Ft.

Business ___ &/or Income Property ___ Details:

Gross Annual Income 20__ \$ _____ 20__ \$ _____ 20__ ytd. Thru _____ \$ _____
 Net Operating Income 20__ \$ _____ 20__ \$ _____ 20__ ytd. Thru _____ \$ _____