



# AZTEC FINANCIAL SERVICES

PH: 813-261-5125 FAX: 813-814-1266

Commercial Mortgage Application

Property Type: **MOBILE HOME PARK**

Contract Number \_\_\_\_\_

Application Date \_\_\_\_\_

Aztec Originator \_\_\_\_\_

Other \_\_\_\_\_

## Borrower Information

Borrower Name \_\_\_\_\_

Borrower Type  Individual  Corp  LLC  Trust  Ltd or Gen Ptnrshp  Other \_\_\_\_\_

Primary Contact \_\_\_\_\_ Contact Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Net Worth \$ \_\_\_\_\_ Owner(s) FICO Scores \_\_\_\_\_ Prev Bankruptcy: Y N

## Loan Information

Loan Name/Description \_\_\_\_\_

Recourse Preference  Recourse  Non-Recourse  Negotiable  Closing Date \_\_\_\_\_

Loan Purpose  Purchase  Refinance  Construction

If Purchase, Purch Price \$ \_\_\_\_\_

If Refinance, Loan Balance \$ \_\_\_\_\_ Prev Interest Rate \_\_\_\_\_ % Type: Fixed \_\_\_ Variable \_\_\_

Cost of Recent Improvements \$ \_\_\_\_\_ Improvements Documented? Yes \_\_\_ No \_\_\_ Unknown \_\_\_

If Constr, Constr Cost + Land \$ \_\_\_\_\_ Completion Date \_\_\_\_\_

## Property Information

Property Name \_\_\_\_\_ Owned Coaches \_\_\_\_\_ % Units for Sale \_\_\_\_\_ %

Property Subtype: 1 Star MHP \_\_\_ 2 Star MHP \_\_\_ 3 Star MHP \_\_\_ 4 Star MHP \_\_\_ 5 Star MHP \_\_\_ Other \_\_\_

Land Area \_\_\_\_\_ Property Management Contract in place? Y N ?

Last Appraised Value \$ \_\_\_\_\_ Last Sale Price \$ \_\_\_\_\_

Last Appraisal Date \_\_\_\_\_ Date of Last Sale \_\_\_\_\_

Property Attributes Income Subsidized (HAP/HUD): Y N ? What %? \_\_\_\_\_ % Owner-Occupied: Y N ?

Adjacent to Sewage/Waste Treatment facility: Y N ? No. Furnished Units \_\_\_\_\_ Student Housing \_\_\_\_\_ % Corp Housing \_\_\_\_\_ %

Pools \_\_\_ Laundry Rooms \_\_\_ Clubhouses \_\_\_ Tennis Courts \_\_\_ Exercise Rms \_\_\_ Playgrounds \_\_\_ Security Gates \_\_\_

Surrounding Land Use: Similar Res \_\_\_ Higher Scale Res \_\_\_ Lower Scale Res \_\_\_ Retail \_\_\_ Office \_\_\_ Industrial \_\_\_ Mixed Use \_\_\_

## Building Information

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Year Constructed \_\_\_\_\_ Year Renovated \_\_\_\_\_ Overall Appearance: Avg \_\_\_ Above \_\_\_ Below \_\_\_

Est. Market Vacancy Percentage \_\_\_\_\_ %

Other Remarks:

Digital Photographs Inside and Outside of Building Provided Y N Please Include Photos Or Send Via E-mail

**Owner(s) Information**  
 Attach Second Sheet If Necessary

<b>Owner Name:</b>	<b>Owner Name:</b>
<b>Home Address:</b>	<b>Home Address:</b>
<b>Social Security Number :</b>	<b>Social Security Number :</b>
<b>% of Ownership:</b>	<b>% of Ownership:</b>
<b>Annual Compensation: \$</b>	<b>Annual Compensation: \$</b>

**Officer & Director Information (If Not Listed Above)**

<b>Owner Name:</b>	<b>Owner Name:</b>
<b>Home Address:</b>	<b>Home Address:</b>
<b>Social Security Number :</b>	<b>Social Security Number :</b>
<b>% of Ownership:</b>	<b>% of Ownership:</b>
<b>Annual Compensation: \$</b>	<b>Annual Compensation: \$</b>

**General Information**

<b>Number Of Employees At Time Of Application:</b>	<b>Number Of Employees Expected After This Loan:</b>
<b>Accountant's Name &amp; Phone:</b>	<b>Attorney's Name &amp; Phone:</b>
<b>Insurance Agent's Name/Phone:</b>	<b>Other Insurance (Life/Hazard) Agent's Name &amp; Phone:</b>
<b>Bank Contact: Phone:</b>	<b>Mortgage Contact: Phone:</b>
<b>Address:</b>	<b>Address:</b>
<b>Account #: Fax #:</b>	<b>Account #: Fax #:</b>

**DECLARATION**

The above information, together with any accompanying financial statements, schedules or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. The undersigned hereby warrants that any individual identified above who is either a principal, personal guarantor or a sole proprietor of the credit applicant, recognizes that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, has provided his/her written authorization for inquiry as to their credit worthiness, including but not limited to obtaining a consumer credit report, and shall hold Aztec Financial Services LLC (AFS) and its assignees harmless for same. AFS is hereby authorized to investigate (directly or through an agent or nominee) your/their credit and financial standing. You understand that such investigation may include seeking information as to the background, credit and financial responsibility of your officers and principals (or any of them). The applicant further agrees to notify AFS promptly of any material change in any such information they may provided in conjunction with this application.

**If Applicant(s) are to Personally Guarantee -- Guarantor(s) Must Provide Signature(s) To Enable Credit Investigation.**

**Federal Equal Credit Opportunity Act (FECOA)**

In the event that your application for business credit is denied, you have the right to a written statement of the reason of denial. To obtain that statement please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program; or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The federal agency that administers our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity Washington, DC 20580.

<b>Applicant</b>	<b>Signature</b>	<b>Title</b>	<b>Date</b>

**FAX TO AZTEC AT: 813-814-1266**  
**AZTEC FINANCIAL SERVICES LLC**  
 PH: 813-261-5125 OR 877-298-3219  
 550 N. Reo St. Suite 300, Tampa, FL 33609    www.aztecfs.com    credit@aztecfs.com

# AZTEC FINANCIAL SERVICES -- MOBILE HOME PARK

## Rent Roll

**Building Name** \_\_\_\_\_ **Rent Roll Date** \_\_\_\_\_

No.	Indicate Unit Type: Single-Wide, Double-Wide, Triple-Wide, Coach Rental Only, RV Pads/Spaces, Other-Pad Rent, Other	No. of Occupied Units	No. of Vacant Units	Avg. Monthly Rent per Unit	Est. Market Rent per Unit	Avg. Unit Area (SF)	Min. Monthly Rent per Unit	Max. Monthly Rent per Unit	Utilities/Services Included in Rent										
									Heat	Elec	Water	Sewer	Gas	Oil	Landsc	Lndry	Parkng		
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# AZTEC FINANCIAL SERVICES -- MOBILE HOME PARK

## Income & Expenses

**Building Name** \_\_\_\_\_

Description	3rd Preceding Year _____	2nd Preceding Year _____	Preceding Year _____	YTD No of Months____	Trailing 12 Months	Adjustments	Final	Notes
Base Rent								
Laundry/Vending Income								
Parking Income								
Other Income								
Vacancy & Coll. Loss								
<b>Effective Gross Income</b>								
Real Estate Taxes								
Property Insurance								
Utilities								
Repairs and Maintenance								
Management Fees								
Payroll and Benefits								
Advertising and Marketing								
Professional Fees								
General and Administrative								
Other Expenses								
Ground Rent								
<b>Total Operating Expenses</b>								
<b>Net Operating Income</b>								
Cap Ex. (Repl. Reserves)								
Extraordinary Capital Exp.								
<b>Total Capital Items</b>								
<b>Net Cash Flow</b>								