

Mortgage Cap Financial

Please complete and fax to 212-208-3069

Borrowing Entity: _____

Property Address: _____

Nearest Cross Street / Intersection: _____

City: _____ County: _____ State: _____ ZIP Code: _____

Anticipated Loan Amount: _____ Anticipated Closing Date: _____

Anticipated Loan-to-Value Ratio: _____ Anticipated Total Debt LTV: _____

1. Is this Loan an: Acquisition loan, or Re-Finance (please check one)
2. Is this Loan: Fully Amortizing, or Balloon (please check one)
3. Is Loan secured by the: Land, Building(s), Furniture & Fixtures (check all that apply)
4. Will Lender possess 1st Lien-Holder status against the collateral property? Yes / No
5. Is this a construction loan? Yes / No
6. Term of loan: _____

7. Describe the current use(s) of the Property: _____

8. Describe the past use(s) of the Property (If unknown, so state): _____

9. Describe the intended use(s) of the Property (If same as current, so state): _____

10. If the Property is/was used for Warehouse/Light Industrial purposes, describe the materials stored and/or industry conducted: _____

11. Are there, or have there ever been, any of the following facilities occupying the property?

Dry Cleaner	No _____	Yes _____	If yes, when _____
Gas Station	No _____	Yes _____	If yes, when _____
Hazardous Waste Generator	No _____	Yes _____	If yes, when _____
Manufacturing Facility	No _____	Yes _____	If yes, when _____

12. Have you ever received, or do you have knowledge of, any environmental site assessment, notice of violation, or other information from any governmental agency, environmental consultant, or public, private, or non-profit group that addresses environmental issues on the property? No _____ Yes _____

If Yes, please describe and attach copies: _____

13. Are there, or have there ever been, any of the following on or beneath the property?

a. Underground Storage Tank(s) No ___ Yes ___ If yes, how many _____

b. Above Ground Storage Tank(s) No ___ Yes ___ If yes, how many _____

If you checked YES to either a or b above, continue answering questions c through l below:

c. Have the tank(s) been removed? No ___ Yes ___

d. Are the tank(s) registered? No ___ Yes ___

e. What is (was) the tank's contents? _____

f. When was the tank installed? _____

g. Have the tank(s) been integrity tested? No ___ Yes ___

If yes, when? _____ Did the tank(s) pass? No ___ Yes ___

h. Has there ever been any evidence of leaking? No ___ Yes ___

If yes, describe corrective action taken: _____

i. Are the tank(s) covered by a separate insurance policy? No ___ Yes ___

j. Are the tank(s) covered by a state fund? No ___ Yes ___

k. Are they in compliance with 1998 EPA standards? No ___ Yes ___

l. For AGST's only: Is there secondary containment? No ___ Yes ___

The undersigned represents that the above statements are true and correct to the best of their knowledge and that no material facts have been suppressed or misstated.

Legal Borrower (please print or type)

Property Owner (please print or type)

Signature

Date

Signature

Date