

Loan Submission Form

2476 Lake Ave Altadena, Ca. 91001 Office.626.296.7777 Fax.626-296-7771 www.albcommercialcapital.com

											Date	e Submitted	:		
	Broker Contact Information														
Company Name						Loan Officer Name									
Phone:				Fa		Email:									
Address:					City/State/Zip:										
DRE Licen	se#														
		-				Borro	ower	Infor	mat	ion					
Borrower Name:							Co-Borrower Name:							•	
Credit Scores:					Credit Scores:										
Mailing Address: (for Pre and Post Closing)							С	ity, State	, Zip:		•				
Name	of Borrov Entity:	ving					-								
Title Vesting:															
Sole Ownership Community Property LLC Corporation Trust Partnership Other:															
Transaction Summary															
Subject Pr Street Add									City						
State				Zip Code					Coun	ty					
Propert	ty Type:				Property Ir							ncome Ana	alysis		
☐ Multifamily				# Unit	Gross Annual Income										
Office				# Tenants:			Vacancy & Collection Losses							%	
Retail				# Tenants:			Effective Gross Income								
Industrial				# Tenants:			Expenses							%	
ĺ	Mixe	ed-u	se	# Tenant	Net Operating Income										
	Other:														
Complet	e Detail	ls B	elov	For Purcl	ase	Transact	ions								
Sales Price				Loan Ar			mount:				Cash Down Payment:				
LTV:				COE					103′	1 Excha	nge	YES	NO		
Seller Carry				YES NO			CLTV								
Complet	e Detail	s B	elov	For Refin	ance	Transac	tions								
Estimated Value				Loan F			Request					LTV			
Rate & Term Only			nly	Refinance W/Cash-o			ut How Muc Cash Out						·		
1st Trust Deed \$					Casii Out			Lend Nam							
2nd Trust Deed \$										Lend Nam	er				