



APPLICATION FORM - DIRECT LOANS

REFERRAL SOURCE INFORMATION

CONTACT NAME	
EMAIL ADDRESS	
CONTACT NUMBER	
COMPANY	
COMPANY EIN	
PARK 49 CONSULTANT	

SUBJECT PROPERTY DETAILS

STREET ADDRESS	
CITY, STATE & ZIP CODE	
COUNTY	
PROPERTY TYPE	
NUMBER OF UNITS	
LOAN PURPOSE	
PURCHASE PRICE	
PURCHASE DATE	
CAPEX	
CURRENT ESTIMATED VALUE	
CURRENT SENIOR DEBT	
CURRENT SENIOR LENDER	
OTHER DEBT	
OTHER LENDER	

SUBJECT PROPERTY INCOME & EXPENSES

GROSS MONTHLY RENTAL INCOME	
ANNUAL TAXES	
ANNUAL INSURANCE	
ANNUAL HOA DUES	
ANNUAL UTILITIES EXPENSES	
ANNUAL MAINTENANCE EXPENSES	
ANNUAL PROPERTY MGMT FEES	

BORROWER INFORMATION

FULL NAME	
CONTACT NUMBER	
EMAIL ADDRESS	
HOME ADDRESS	
PERSONAL GUARANTEE (Y/N)	
ROLE IN TRANSACTION	
OWNERSHIP PERCENTAGE	
CITIZENSHIP STATUS	
YEARS OF EXPERIENCE	
PROPERTIES OWN	

Authorization & Signature Form to Follow

AUTHORIZATION & SIGNATURE FORM

This Authorization Form (the "Form") is made and entered into by the parties defined below and is effective as of _____ (the "Effective Date").

_____ its successors and/or assignees, and its affiliate below with its respective principal address at _____ (the "Undersigned") on one hand, and Park 49 Inc. its successors and/or its assignees, and its affiliate below, with its principal address at 12 E. 49th Street 11th Floor, New York, NY 10017 ("Park 49") on the other hand.

Whereas, the Undersigned authorizes Park 49 to release any information to third parties such as but not limited to; Prospective Partner(s), Capital Provider, Loan Servicer, Loan Administrator, Legal Counsel, Accounting Firm, Credit Reporting Agency, Appraisal Company, Title Agency and any Regulatory Agency, which Park 49 has deemed necessary in order to properly, conduct its business with reference to the Undersigned's request.

This Form may be reproduce to acquire references from more than one source.

FURTHERMORE

- (1) To all, please be advised that the Undersigned, and each of them, has made a request to Park 49 for an extension of credit. Therefore, the Undersigned, and each of them, hereby authorizes you to provide and/or disclose information to Park 49 or any affiliated third party with relation to the Undersigned's request.
- (2) In addition, the Undersigned, and each of them, hereby authorizes Park 49 to disclose to any third party, or any agent or employee thereof, information regarding the deposit or credit experience with any of the Undersigned.
- (3) A photographic or carbon copy of this authorization bearing a photographic or carbon copy of the signature(s) of the Undersigned may be deemed to be equivalent to the original hereof and may be used as a duplicate original.

ACKNOWLEDGEMENT

By executing this Form, the Undersigned represents they have reviewed its contents and fully understand and agree to its language. This Form may be executed in any number of counterparts, all of whom taken together shall constitute one single agreement among the parties hereto.

AGREED & ACCEPTED BY

NAME	
SOCIAL SECURITY NUMBER	
DATE	
SIGNATURE	