



PACIFIC MORTGAGE FUNDING CORPORATION

Commercial Real Estate Checklist

Submission Date: ____ - ____ - ____

www.PacificMortgage.com

1. Color photos of subject property: Front, rear, side, inside, and street scene.
2. Current tenant lease summary: Start dates, expiration dates, security deposits, unit mix, etc.
3. Last two years income & expense statements, along with a year-to-date profit & loss.
4. Last two years personal & business tax returns. If self-employed, need year-to-date P&L.
5. Personal & business financial statements showing history, assets and liabilities.
6. If this is for construction, need complete cost breakdown including monies invested.
7. If this is a purchase, need copy of purchase contract, escrow instructions, business plan.
8. Copies of any & all corporation by-laws, partnerships, operating or trust agreements.

Source: _____ Telephone: (____) _____ Fax: (____) _____
(Contact)

Borrower: _____

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

TRANSACTION DATA: *(Minimum loan amounts start at \$1 Million, and \$500,000 minimum in the western states)*

Purchase Refinance Construction Bridge Loan Mezzanine/2nd T.D

Sales Price or Total Cost	\$ _____	Date Acquired	____/____/____
Cash Down or Monies Invested	\$ _____	Original Cost	\$ _____
1 st T.D. Request	\$ _____	Estimated Value (As Is)	\$ _____
2 nd T.D. Request	\$ _____	Estimated Value (Finished)	\$ _____
Source of Down Payment	_____	Amount of Payoffs	1 st \$ _____
			2 nd \$ _____
			3 rd \$ _____
Requested Loan Amount:	\$ _____		
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	_____
# of Garages	_____	# Covered Carports	_____	# of Open Parking	_____

Metered utilities: Individual Master Gas Electricity Water

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

Gross Annual Income	2005 \$ _____	2006 \$ _____	2007 ytd. Thru _____	\$ _____
Net Operating Income	2005 \$ _____	2006 \$ _____	2007 ytd. Thru _____	\$ _____