Loan Application

Return this application via email to lending@cicchicago.com or via mail to Community Investment Corporation (CIC), 222 South Riverside Plaza, Suite 380, Chicago, Illinois 60606, with a non-refundable application fee of \$300. If you have questions or require assistance, please call CIC at (312) 258-0070.

APPLICANT'S NAME APPLICANT'S ADDRESS				PRIMARY PHONE		
				SECONDARY PHONE		
CITY	STATE	ZIP		EMAIL ADDRESS		
PROPERTY INF						
○ 1-4 unit portfoli	o (9-unit minimum. F	ill in property ac	ddresses	s on page 2 of application). $\frac{1}{N}$	UMBER OF BUILDINGS	NUMBER OF RESIDENTIAL UNITS
Multifamily build	ding (5-unit minimur	n)	TIAL UNITS	NUMBER OF COMMERCIAL UNITS	IS BUILDING	VACANT?
ADDRESS				CITY		
ENERGY INFOR	RMATION:					
Space heating	O Electric	○ Gas		Owner-paid (central)	O Tenant Pa	aid
Hot water	O Electric	O Gas	0	Owner-paid (central)	O Tenant Pa	aid
TRANSACTION						
\bigcirc Acquisition $_{\overline{EXP}}$	ECTED PURCHASE DATE (MM/DD/Y	YYY)		O Refinance ORIGINAL PURCHASE D	ATE (MM/DD/YYYY)	
APPLICANT:	O General Par	tnership OI	LLC	O Limited Partnership	O C	orporation
Names of princip	als and respective	shares of owr	nership	:		
Name		Shares (%)		Name		Shares (%)
Name		Shares (%)		Name		Shares (%)
PROPOSED PROJECT COSTS: Check one)				PROPOSED SOURCE OF FUNDS: Owner's equity \$		
○ Acquisition \$_				. ,		
Acquisition \$Refinance \$	RCHASE PRICE			\$CIC LOAN	OTHER LOANS	
REFI	NANCE AMOUNT			DESCRIBE OTHER LOAN(S)		
				How do you intend to s	atisfy owner's	equity requireme
10% contingency	reserve \$			Applicant cash assets Existing applicant equ		rom limited partne
				O Sale of applicant's oth		-





Loan Application (for 1-4 unit portfolio only)

PROPERTY LIST (1-4 UNIT PORTFOLIO ONLY):

Address	City	No. of Res Units	PIN (optional)
Total			

Note: loan officer will send a spreadsheet to be completed by applicant with more property and operating information.





Loan Application

AGREEMENT

The undersigned applies for the loans in this application to be secured by a first or second mortgage or deed of trust on the property described herein, and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application and the attachments are true and are made for the purpose of obtaining the loan. Verification and other relevant information may be obtained from any source named in this application and/or attachments. CIC is authorized to discuss this Application and information contained herein or in the exhibits and attachments hereto with any necessary party referenced herein.

The undersigned agrees to comply with the Davis-Bacon Act, if applicable. Reasonable access to the property will be provided for CIC's staff or its agents. The property title holder authorizes the release to CIC of any existing municipal code inspection reports cited against the subject property.

Real Estate Appraisal(s) will remain the sole property of CIC. The undersigned assumes the responsibility for selecting and using contractors which conform to CIC standards. CIC does not warrant the performance of the contractor. This mortgage may be sold on the secondary buying market.

This is an application for financing, it is not a binding contract for a loan. Any commitment, if issued by CIC, will only be expressed in a separate written commitment after CIC's consideration of this application.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern

I/We hereby authorize you to release to Community Investment Corporation, for verification purposes, information concerning:

- Employment history, dates, title, income (hours worked, etc.).
- Bank and deposit account records
- Mortgage loan rating (opening date, high credit, payment amount, loan balance, and payment record).
- Any information deemed necessary in connection with a consumer credit report.

This information is for the confidential use of Community Investment Corporation.

A copy of this authorization (being a copy of the signature(s) of the undersigned) shall be deemed to be the equivalent of the original and may be used as a duplicate original up to 90 days from the date of signature.

PRINT NAME	SOCIAL SECURITY NUMBER
SIGNATURE	DATE
PRINT NAME	SOCIAL SECURITY NUMBER
SIGNATURE	DATE
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SIGNATURE	DATE
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SIGNATURE	DATE



