

Property Operating Statement

Note: Only required to be completed for Investment property.

Applicant Name: _____ Phone Number: _____

Complete Address of Collateral Property:

Street: _____

City: _____ State: _____ Zip: _____

Annual Period: _____

INCOME:

| | |
|--|-------|
| Total Annual Rents Received | _____ |
| Other Annual Income (parking, bill boards, laundry, etc) | _____ |
| Total Potential Gross Income (PGI) | _____ |
| Vacancy and Collection Loss (10%) | _____ |

EFFECTIVE GROSS INCOME (EGI):

EXPENSES:

| | |
|-----------------------------------|-------|
| Advertising | _____ |
| Auto and travel | _____ |
| Cleaning and maintenance | _____ |
| Commissions | _____ |
| Insurance | _____ |
| Legal and other professional fees | _____ |
| Management fees | _____ |
| Repairs | _____ |
| Supplies | _____ |
| Real Estate Taxes | _____ |
| Utilities | _____ |
| Other | _____ |

TOTAL EXPENSES:

Total Annual Net Operating Income: _____

Monthly Net Operating Income: _____

Monthly Net Operating Income at 1.2 DSC: _____

Less: Current Monthly First Mortgage Payment: _____

Maximum Monthly Payment Available: _____

Signature _____ Date _____

Signature _____ Date _____