

# Linward Mortgage, LLC

3740 Beach Blvd. Suite 306 Jacksonville, FL. 32207

Phone (904) 807-0030 / FAX (904) 807-0021

## Linward Mortgage, LLC - Investor Application for pre-qualification

Exact Legal Name of Borrowing Company or Individual please print or type	Borrower's Business Mailing Address
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Corporation ____ LLC ____ Partnership ____ Individual-d/b/a ____ Tax I.D. # _____ Name of Bank: _____ Bank Account Number: _____	<b>Borrower Telephone:</b> Office: (    ) _____ FAX: (    ) _____ Mobile: (    ) _____ Pager: (    ) _____ e-mail: _____
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**LIST ALL INDIVIDUALS WHO OWN 10% OR MORE OF COMPANY - Full Legal Names Including Middle Initials:** (use separate application for additional owners)

Guarantors/Owners	Title	Social Security #	Percent of Ownership	Married	Single	Separated
1.) _____ / _____		- - - - -	_____ %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.) _____ / _____		- - - - -	_____ %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If Owner(s) is/are Married, List Spouse's Full Legal Names Including Middle Initials and Social Security Numbers:**

1.) \_\_\_\_\_ / \_\_\_\_\_ - - - - - 2.) \_\_\_\_\_ / \_\_\_\_\_ - - - - -

**Investor Experience Summary:**

# of Homes currently being rehabed: \_\_\_\_\_ # of Homes completed this year: \_\_\_\_\_

# of Years Rehabing Experience: \_\_\_\_\_ # of Homes Rehabed Throughout Career: \_\_\_\_\_

Outside Employment:

Current Employer Name: \_\_\_\_\_ Title/Position/Duties: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Prior Employer Name: \_\_\_\_\_ Title/Position/Duties: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Have you, the company or any of the principals declared Bankruptcy within the last 10 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you, the company or any of the principals currently a Defendant in any Suits or Legal Actions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you, the company or any of the principals have any outstanding Judgments against them?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you, the company or any of the principals have any unpaid Federal or State Income Taxes for the current or previous years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you, the company or any of the principals ever had your General Contractor's License revoked or suspended?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any principal or guarantor listed above ever borrowed from Liberty Savings Bank under a different entity or name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE ATTACH A LETTER OF EXPLANATION**

I/We certify that the above information is true and correct and that I/we have not knowingly withheld any information. I/We authorize Linward Mortgage, LLC to obtain necessary credit and trade reports and bank, lumber and other references for the business, principals and the spouses stated above. I/We authorize Linward Mortgage, LLC to verify employment and obtain any other information it deems necessary to process this application.

\_\_\_\_\_  
Principal/Guarantor Signature Date

\_\_\_\_\_  
Home Address, City, State and Zip Code  
(    ) / (    )

\_\_\_\_\_  
Home Phone Number / Work Phone (if different from above)

\_\_\_\_\_  
Principal/Guarantor Signature Date

\_\_\_\_\_  
Home Address, City, State and Zip Code  
(    ) / (    )

\_\_\_\_\_  
Home Phone Number / Work Phone (if different from above)

\_\_\_\_\_  
Principal/Guarantor Signature Date

\_\_\_\_\_  
Home Address, City, State and Zip Code  
(    ) / (    )

\_\_\_\_\_  
Home Phone Number / Work Phone (if different from above)

\_\_\_\_\_  
Principal/Guarantor Signature Date

\_\_\_\_\_  
Home Address, City, State and Zip Code  
(    ) / (    )

\_\_\_\_\_  
Home Phone Number / Work Phone (if different from above)