



MFS LOAN PROPOSAL CHECKLIST

COMMERCIAL OR CLOC PROPOSAL (UP TO 65% LTV of APPRAISED VALUE)

- COLOR PICTURES, FRONT OF PROPERTY, INTERIOR & STREET VIEW
- COMPLETED LOAN PROPOSAL FORM
- AFFIDAVIT OF LOAN PURPOSE
- COPY OF THE CERTIFICATE OF OCCUPANCY
- COPY OF TAX ABATEMENT (IF APPLICABLE)
- CONTRACT OF SALE (IF PURCHASE)
- DEED (IF REFINANCE) PLUS DATE OF PURCHASE & AMOUNT
- UNIFORM ENVIRONMENTAL HISTORY QUESTIONNAIRE
- LIST OF MEMBERS (IF ENTITY)
- SURVEY
- THREE YEARS HISTORY OF INCOME & EXPENSES ON PROPERTY
- DHCR ANNUAL RENT REGISTRATION ON MULTI-FAMILY (6 FAMILY AND ABOVE)
- THREE YEARS BUSINESS AND/OR PERSONAL FINANCIAL STATEMENTS, PRO-FORMA AND/OR TAX RETURNS FROM THE BORROWING ENTITY
- COPY OF ALL THE LEASES

MAIL COMPLETE LOAN PROPOSAL PACKAGE TO:

MASPETH FEDERAL SAVINGS & LOAN ASSOCIATION
56-05 69TH STREET
MASPETH, NY 11378
(718) 651-7888
ATTN: MORTGAGE ORIGINATION/COMMERCIAL PROPOSAL

OR EMAIL TO: achung@maspethfederal.com

dally@maspethfederal.com

Pczyz@maspethfederal.com

MASPETH FEDERAL SAVINGS AND LOAN ASSOCIATION - COMMERCIAL LOAN PROPOSAL FORM

Please complete all information below and return to Maspeth Federal Savings & Loan Association via e-mail to commorig@maspethfederal.com. Please call our Origination Group at 718-651-7888 if you have any questions.

BROKER INFORMATION

Broker Company Name: _____ Broker's Name: _____

Broker Phone: _____ E-mail: _____

APPLICANT/TRANSACTION INFORMATION

Applicant Name(s): _____ Applicant(s) Phone: _____

Title will be held in what Name(s): _____

Applicant(s) Address: _____

Applicant Email: _____

Loan Amount Requested: \$ _____ Terms: 3 5 10 15 Amort: 10 15 20 25 30

Loan Purpose: Purchase: Cash-out Re-finance: CLOC: Construction: Land:

If Purchase, purchase price: \$ _____ Source of down payment: _____

If Refinance, Name of Lien Holder (if any): _____

Current interest rate: _____ % Outstanding Balance: \$ _____

Date property was last transferred: _____ Name of Seller: _____ Sold for: \$ _____

PROPERTY INFORMATION

Complete Subject Property Address: _____

Block: _____ Lot: _____ Property type (per C/O): _____

Description: _____

Lot Dimensions: _____ Building Dimensions: _____ Stories: _____ Zoning Code: _____

Owner Occupied?: Residential - Yes No Commercial - Yes No

Total # of residential units: _____ Vacant residential units: _____

Total # of commercial units: _____ Vacant commercial units: _____

Property details, please check all that apply:

Dry cleaning?: Auto Repair/Gas Station?: Warehouse?: Industrial?:

421(a) eligible?: 1031 exchange?: Garage?: Extension?:

Use Of funds: _____

INCOME INFORMATION

Please list all current **RESIDENTIAL** tenant info. For vacant units, list maximum legal monthly rent:

Tenant Name or Unit Number	# of Rooms	Lease start date	Lease expiration date	Monthly Rent	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				Residential Income Monthly	\$0.00
				Residential Income Annually	\$0.00
				- less vacancy (5%)	\$0.00

Please list all current **COMMERCIAL** tenant info. For vacant units, list market monthly rent:

Tenant Name or Unit Number	Type	Total Square Feet	Lease expiration date	Monthly Rent	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				Commercial Income Monthly	\$0.00
				Commercial Income Annually	\$0.00
				- less vacancy (10%)	\$0.00

YEARLY BUILDING EXPENSE INFORMATION

Real Estate Taxes \$ _____ Water/Sewer \$ _____
 Insurance \$ _____ Utilities \$ _____
 Fuel/Oil \$ _____ Repairs/Maintenance \$ _____
 Management \$ _____ Reserves \$ _____

Total Income Annually \$	<u>0.00</u>
- Total Expenses Annually \$	<u>0.00</u>
= Net Income \$	<u>0.00</u>

AFFIDAVIT OF LOAN PURPOSE

STATE OF NEW YORK

COUNTY OF _____

_____, being duly sworn deposes and says:

1. That Applicant resides at _____
_____ and is over the age of 21.

2. That Applicant is the applicant for a mortgage on premises located at _____.

3. Please check box which applies:

- That said property **is** a rental property.
 That said property **is not** a rental property.

4. Please check box which applies:

That said loan proceeds are intended to be used primarily for business and/or commercial purposes (e.g.: acquiring, maintaining, or improving investment/rental property, etc.)

MUST STATE USE OF FUNDS: _____

That said loan proceeds are intended to be used primarily for consumer purposes (e.g.: paying personal bills, school tuition, etc.)

MUST STATE USE OF FUNDS: _____

5. Please check box which applies:

- That Applicant **does not occupy** the premises for more than 14 days per year or does not intend to occupy it for more than 14 days during the coming year.
 That Applicant **does occupy** the premises.

6. That Applicant fully understands that it is a federal crime, punishable by fine of not more than \$5,000.00 or imprisonment of not more than two years/or both, to knowingly make false statements concerning any of the above facts under the provisions of Title 18, U.S.C. Section 1014.

7. That this Affidavit is made knowing full well that Maspeth Federal Savings and Loan Association will rely upon the representations herein in determining whether or not to approve deponent's credit for a mortgage loan of \$ _____.

X _____

Sworn to before me this _____
day of _____, 20 _____

UNIFORM ENVIRONMENTAL HISTORY

Questionnaire and/or Certificate

Property Address _____

City _____ State _____ Zip _____

Name of person interviewed _____

Dates of Ownership: From _____ To _____

Other way familiar with Property: From _____ To _____

Interviewer _____ Date _____

Address _____

City _____ State _____ Zip _____

Telephone _____

This form is used to report the results of an interview with the current or former property owner or others familiar with the property about known hazardous substances or detrimental environmental conditions on or around the subject property. When signed by the interviewer, it becomes their certificate.

#	ASBESTOS	YES	NO	Comment on all "Yes" Responses
1.	Are you aware of any asbestos on your property? Pipe covering Heating/Hot water unit covering Tile Siding Other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2.	Are you aware of any asbestos survey being performed on your property?	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are you aware of any asbestos tests being conducted on materials from your property?	<input type="checkbox"/>	<input type="checkbox"/>	

#	PCB's (Polychlorinated Biphenyls)	YES	NO	Comment on all "Yes" Responses
4.	Are you aware of any PCB's on your property?	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Are you aware of any PCB's on neighboring properties that might contaminate your property?	<input type="checkbox"/>	<input type="checkbox"/>	

#	RADON	YES	NO	Comment on all "Yes" Responses
6.	Are you aware of any radon tests made on the property?	<input type="checkbox"/>	<input type="checkbox"/>	
7.	If so, was radon test made more than 12 months ago?	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Were the results over 4 pCi/L? (if so, report actual figures)	<input type="checkbox"/>	<input type="checkbox"/>	
9.	To the best of your knowledge do any properties within one mile have radon levels over 4 pCi/L	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Are you aware of any evidence that nearby structures have elevated indoor levels of radon or radon progeny?	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Are you aware of any information that indicates the local water supplies have been found to have elevated levels of radon or radium?	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Are you aware of any properties within one mile of your property of any sites that were or currently are used for uranium, thorium or radium extraction or for phosphate processing?	<input type="checkbox"/>	<input type="checkbox"/>	

#	SOIL CONTAMINANTS (Underground Storage Tanks)	YES	NO	Comment on all "Yes" Responses
13.	Are you aware of any underground storage tanks presently on the property?	<input type="checkbox"/>	<input type="checkbox"/>	
14.	Are you aware of any underground storage tanks which were previously removed from the property? (If so, note date)	<input type="checkbox"/>	<input type="checkbox"/>	
15.	Are you aware of any site survey made by a qualified engineer which indicates the property is free of UST's?	<input type="checkbox"/>	<input type="checkbox"/>	
16.	Are you aware of any petroleum storage and/or delivery facilities (including gas stations) or chemical manufacturing plants located within one mile of the property?	<input type="checkbox"/>	<input type="checkbox"/>	

#	WASTE SITES	YES	NO	Comment on all "Yes" Responses
17.	Are you aware of any physical testing (including on-site sampling of soil and groundwater) to determine if the property is free of waste contamination?	<input type="checkbox"/>	<input type="checkbox"/>	
18.	Do you know if the property was ever used for research, industrial or military purposes?	<input type="checkbox"/>	<input type="checkbox"/>	
19.	Do you know if the property has ever been occupied by owners or commercial tenants who are likely to have used, transported, or disposed of toxic chemicals (e.g. dry cleaners, print shops, service stations, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
20.	Do you know if there is any water provided to the property or from a well or private water company?	<input type="checkbox"/>	<input type="checkbox"/>	
21.	Do you know if the property or any site within one mile, appears on any state or federal list of hazardous waste sites (e.g. CERCLIS, HWDMS, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
22.	Do you know of any visible evidence or documents that indicate there is or was dangerous waste handling on the property or neighboring sites (e.g. stressed vegetation, stained soil, open or leaking containers, foul fumes or smells, oily ponds, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	

#	UREA (Formaldehyde)	YES	NO	Comment on all "Yes" Responses
23.	Do you know if the property contains UREA Formaldehyde Foam Insulation? (If yes, note location and amount)	<input type="checkbox"/>	<input type="checkbox"/>	

#	LEAD PAINT	YES	NO	Comment on all "Yes" Responses
24.	Do you know if the property was tested for lead paint?	<input type="checkbox"/>	<input type="checkbox"/>	
25.	Do you have any reason to believe that the property contains lead paint?	<input type="checkbox"/>	<input type="checkbox"/>	

#	DRINKING WATER	YES	NO	Comment on all "Yes" Responses
26.	Do you know if the drinking water was ever tested for lead? (if yes, note date and results)	<input type="checkbox"/>	<input type="checkbox"/>	
27.	Do you know if any other tests were ever made on the drinking water? (If yes, describe and note results)	<input type="checkbox"/>	<input type="checkbox"/>	
28.	Do you have any reason to believe there was or is any problem with the quality and quantity of drinking water available at the property?	<input type="checkbox"/>	<input type="checkbox"/>	

#	AIR POLLUTANTS	YES	NO	Comment on all "Yes" Responses
29.	Do you know if the interior air was tested?	<input type="checkbox"/>	<input type="checkbox"/>	
30.	Do you know any reason to believe there was or is any problem with the interior or exterior air of the property?	<input type="checkbox"/>	<input type="checkbox"/>	

#	OTHER ENVIRONMENTAL HAZARDS	YES	NO	Comment on all "Yes" Responses
31.	Are you aware of any other hazardous substances or detrimental environmental conditions that effect the property?	<input type="checkbox"/>	<input type="checkbox"/>	

I certify that I have read the answers to the questions on this form and acknowledge that they are accurate to the best of my knowledge.

Signatures

Current or former property owner(s)

_____ Date _____

_____ Date _____

_____ Date _____

_____ Date _____

Interviewer

_____ Date _____

SELLER'S CERTIFICATION - ENVIRONMENTAL HAZARDOUS SUBSTANCES

Property Identification:

Address _____

City _____ State _____ Zip _____

Brief Description: _____

Seller Identification:

Name of Owner(s) _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Property Owned From _____ To _____

Seller's certification:

I do hereby certify that to the best of my knowledge during and before my ownership of the above described property:

- A. The property was not used as a dump site or storage facility for hazardous substances.
- B. No one has received notification from a federal, state or local government in regard to pending or threatened Superfund or Superlien liability.
- C. To the best of my knowledge no environmental hazards have been identified on the subject property.

Exception to above: _____

I (we) do hereby certify that the above information is true to the best of my (our) knowledge and belief.

Date _____ Seller _____

Date _____ Seller _____