



AMCI - Mortgages

MULTI-FAMILY BUILDING QUESTIONNAIRE

Name of Owner _____

Type of Business Entity: ____ Individual ____ Corporation ____ Partnership

Name of Complex _____ Type _____ Units _____

Primary Telephone () _____ Other () _____

Mailing Address _____ City _____ State _____ Zip _____

Property Address _____ City _____ State _____ Zip _____

Principal (person authorized to sign documents) _____

Percentage of transaction principal owns _____%

Past credit issues that we should be aware of _____

Bookkeeper Name/Number should we have questions on financial statements

Name of management company _____

Name of on-site manager _____ Ph _____

FOR PURCHASES Purchase price \$ _____ Loan amount requested \$ _____

Any deferred maintenance? _____ Anticipated close date _____

FOR REFINANCES Loan amount requested \$ _____

Amount owed \$ _____ Monthly payment \$ _____ Interest Rate _____%

Purpose of Refinance _____

Balloon Payment Yes - No If yes, due date _____ Is there a prepayment penalty _____

Is there a 2nd mortgage Yes - No If Yes, amount _____

Original purchase date _____ Original purchase price _____