

***** PLEASE READ *****

Please complete the five (5) page Loan Application in its entirety. Print and provide a 'wet signature' where signatures are required. If electronically signing the application, must use an e-Sign vendor approved by Axos Bank.

Please be sure to also provide any applicable state-specific addendum(s) to the Loan Application.

Important Information About Procedures for Opening a New Account: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your business license, driver's license, or other identifying documents.

Section 1: Borrowing Entity Information

Name of Borrowing Entity: _____

Name of Guarantor(s): _____

Title will be vested in an entity (*trust, partnership, corporation, LLC*).

A vesting change fee may be assessed if the proposed vesting or structure of the Borrowing Entity is changed after this application is submitted.

Borrower(s) will be (*select type*) :

- General Partnership
 Corporation
 Trust
 Limited Partnership
 Limited Liability Company
 Other _____

(If Trust, proceed to 'Section 3: Subject Property Information'. If Irrevocable Trust, please provide Tax ID number: _____)

Section 2: Vesting Tree

Please use this map to outline the organizational structure of the Borrowing Entity.

Note: If the ownership structure does not fit into this chart, please adjust the chart accordingly or provide an organizational chart in similar format and

Is the Borrowing Entity:

- Yes No A Single Asset Entity
 Yes No A Domestic Entity
 Yes No A newly formed or to-be-formed entity

Please provide comments on multi-asset entities and foreign asset entities on another sheet.

(Borrowing Entity Legal Name)
(Entity Type)
(State of Organization)
(Date Formed)
(Tax ID#)

(Entity Name)		(Entity Name)		(Entity Name)	
(Entity Type)*		(Entity Type)*		(Entity Type)*	
(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**	
(State of Organization)	(% of Ownership)	(State of Organization)	(% of Ownership)	(State of Organization)	(% of Ownership)

(Entity Name)											
(Entity Type)*		(Entity Type)*		(Entity Type)*		(Entity Type)*		(Entity Type)*		(Entity Type)*	
(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**	
(State of Org.)	(% of Owners)										

* Entity Type: General Partnership, Limited Partnership, Limited Liability Company, Corporation, etc.

** Entity/Individual Role: General Partner, Limited Partner, Shareholder, Trustee, Member, Managing Member, Individual, President, etc.

Section 3: Subject Property Information

Number of Units	Property Type	If Property Type is 'other', please describe here			
Street Address (including Unit # if applicable)		City	State	Zip Code	County
Management Company (if applicable)		Management Company Contact Name		Phone Number _____ ext. _____	
Mailing Address (if different than guarantor's address)			Email Address (if different than guarantor's)		

Section 4: Purpose of Loan

Lien Status	<input type="checkbox"/> First <input type="checkbox"/> Second	Requested Loan Amount: _____	Estimated Value: _____	
Property has how many outstanding liens/loans? _____		<input type="checkbox"/> Property Owned Free and Clear		
<input type="checkbox"/> Purchase	Purchase Price	Cash Down Payment	Source of Down Payment	Estimated Closing Date
<input type="checkbox"/> Refinance: Rate & Term	Date Acquired	Acquisition Price	Primary Lien Balance	Secondary Lien Balance

Refinance: Cash Out
Cash Out Purpose:

- Cash Reserves
- Investment, Address (if known) _____
- Debt Consolidation
- Home Improvement (personal residence), Address _____
- Property Improvement (subject property)
- Purchase Another Property
 - Single Family Home, Address _____
 - Multi-Family Residence, Address _____
 - Commercial Property, Address _____
 - OTHER, please explain _____

I/we understand that Lender is considering making this loan to me/us in reliance on the above purpose statement. By signing this form, I/we warrant and affirm the truthfulness of this statement.

1st Lien Information

Current Lender/Creditor's Name	Mailing Address		
Name of Depository	City	State	Zip Code
Loan #	Fax Number	Email Address	

2nd Lien Information

Current Lender/Creditor's Name	Mailing Address		
Name of Depository	City	State	Zip Code
Loan #	Fax Number	Email Address	

Impound/Escrow Request and Mailing Information:

I would like **PROPERTY TAXES IMPOUNDED:** Yes No

I would like **INSURANCE IMPOUNDED:** Yes No

I understand that any additional or supplemental bills received will not be covered by my impound account(s) as the Lender will not have been notified of the additional funds due and that I must pay those bills directly.

Please mail loan statements to the following address:

Address 1 _____

Address 2 _____

City, State, Zip _____

PLEASE NOTE: Property Tax and Insurance (Hazard and/or Flood) impounds may be required as a condition of loan approval. You will be notified at Loan Commitment if impounds are required.

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that administers compliance with this law concerning this creditor is: Consumer Financial Protection Bureau, 1700 G St. NW, Washington, DC 20552

Section 5: Acknowledgment and Agreement

The undersigned specifically acknowledges and agrees that Axos Bank®, including its agents, successors, and assigns, ("Bank") will rely on the information contained in and provided in connection with this application and all such information is given for the purposes of obtaining the loan indicated above. The undersigned certifies that the information provided in and given in connection with this application is true and correct as of the date set forth opposite the signature(s) on this application. The undersigned acknowledges that any intentional or negligent misrepresentations of such information may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both, under the provisions of Title 18, United States Code, Section 1014 and liability for monetary damages to the Bank and any other person or entity who may suffer any loss due to reliance upon any misrepresentation which have been made in connection with this application.

Borrowing Entity: _____ Dated: _____

Authorized signatory X		Date	Authorized signatory X		Date
Name	Title		Name	Title	
Authorized signatory X		Date	Authorized signatory X		Date
Name	Title		Name	Title	

Section 6: Borrower's Certification

Re: Proposed Loan (the "Loan") by Axos Bank® to _____ (the "Borrower") secured by Real Property and Improvements located at: _____.

In order to induce the Lender to make the Loan, and for other valuable consideration, Borrower agrees as follows:

- Warranties and Representations.** Borrower warrants and represents to the Lender that (a) the names of all brokers, agents and finders acting for or on behalf of Borrower who are to be paid any commission, finder's fee, brokerage fee or other compensation of any kind in connection with the Loan have been disclosed in writing by Borrower to Lender prior to the date of Borrower's execution of this Borrower's Certification; and (b) except as otherwise specifically identified in the disclosures made by Borrower pursuant to clause (a) of this Section, Borrower is not represented in the Loan transaction by any broker, agent or finder and Borrower is not aware of any other commissions, finder's fees or brokerage fees due in connection with the Loan.
- Borrower Hold Harmless and Indemnity.** Borrower shall indemnify and hold the Lender and its officers, directors, agents, attorneys, employees, representatives, shareholders, affiliates, successors and assigns harmless from and against any and all liabilities, claims, demands, damages, costs and expenses, including costs of defense and attorney's fees, in connection with any or all of the following: (a) the Lender's payment of any commissions, finder's fees, or brokerage fees to the Broker pursuant to the terms of any of the Loan documents executed by Borrower or any other authorization by Borrower; and (b) any claims for any commissions, finder's fees or brokerage fees in connection with the Loan which arise out of any act, omission or agreement by Borrower or any of its agents.
- Miscellaneous.** The headings to sections of this Borrower Certification are for convenient reference only and shall not be used in interpreting this Borrower Certification. No waiver by the Lender of any of its rights or remedies under this Borrower Certification shall be effective unless such waiver is in writing and signed by the Lender. This Borrower Certification shall be governed by and interpreted under the laws of the State of California. If the Lender institutes an action or proceeding to enforce its rights under the Borrower Certification, the prevailing party in such action or proceeding shall be entitled to recover from the other party reasonable attorneys' fees and costs in addition to any other relief awarded by the court. Borrower acknowledges that the Lender will be relying on this Borrower Certification in closing the Loan.

Borrowing Entity: _____ Dated: _____

Authorized signatory	Authorized signatory
Signature: _____	Signature: _____
Print Name: _____	Print Name: _____
Title: _____ <i>(example: Sole Member, Managing Member, Partner, etc)</i>	Title: _____ <i>(example: Sole Member, Managing Member, Partner, etc)</i>
Authorized signatory	Authorized signatory
Signature: _____	Signature: _____
Print Name: _____	Print Name: _____
Title: _____ <i>(example: Sole Member, Managing Member, Partner, etc)</i>	Title: _____ <i>(example: Sole Member, Managing Member, Partner, etc)</i>

Section 7: Credit Authorization Release

By signing below, I hereby authorize Axos Bank® including its agents, successors, and assigns, ("Bank") to verify my bank records, credit history, and any other information deemed necessary in connection with the Borrower's loan application.

I understand that as part of the verification process, a credit report will be ordered from a consumer-reporting agency prior to loan closing as part of the application process. I understand that use of a photocopy of this form may be necessary to verify one or more of my credit references. I authorize this use and request that a photocopy be honored.

By signing below, the undersigned hereby acknowledges making the above authorizations and certifies that the information provided herein is true and correct. The undersigned acknowledges that any information obtained may be disclosed to applicant, any prospective borrower or guarantor of the loan applied for, and any of their representatives, employees, and affiliates.

Guarantor/Trustee 1		Guarantor/Trustee 2	
Name (legal):		Name (legal):	
SSN:	Date of Birth:	SSN:	Date of Birth:
Home Address (no P.O. Boxes):		Home Address (no P.O. Boxes):	
City, State, ZIP Code:		City, State, ZIP Code:	
Marital Status		Marital Status	
Married	Unmarried	Married	Unmarried
Separated		Separated	
CA registered domestic partner/equivalent in another state ("RDP")		CA registered domestic partner/equivalent in another state ("RDP")	
Guarantor/Trustee 3		Guarantor/Trustee 4	
Name (legal):		Name (legal):	
SSN:	Date of Birth:	SSN:	Date of Birth:
Home Address (no P.O. Boxes):		Home Address (no P.O. Boxes):	
City, State, ZIP Code:		City, State, ZIP Code:	
Marital Status		Marital Status	
Married	Unmarried	Married	Unmarried
Separated		Separated	
CA registered domestic partner/equivalent in another state ("RDP")		CA registered domestic partner/equivalent in another state ("RDP")	

_____ Guarantor/Trustee 1 signature	_____ Date	_____ Guarantor/Trustee 2 signature	_____ Date
_____ Guarantor/Trustee 3 signature	_____ Date	_____ Guarantor/Trustee 4 signature	_____ Date

Section 8: Additional Disclosures

Right to Receive a Copy of Appraisal

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

Appraisal Waiver

You are not required to sign this waiver but may choose to do so.

By signing below, you agree to waive the requirement that the completed appraisal report(s) be delivered to you at least three days prior to the closing of the loan, and consent to delivery of the completed appraisal report(s) at or before closing or within thirty (30) days from the Lender's decision to deny your application.

Guarantor/Trustee

Fair Lending Notice (The Housing Financial Discrimination Act of 1977)

It is illegal to discriminate in the provision of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, marital status, domestic partnership, national origin or ancestry.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.

These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation or refinancing of one- to four-unit family residences occupied by the owner and for the purpose of the home improvement of any one-to four-unit family residence.

If you have any questions about your rights, or if you wish to file a complaint, contact the management of this financial institution or:
OFFICE OF THE COMPTROLLER OF THE CURRENCY, CUSTOMER ASSISTANCE GROUP, P.O. Box 53570, HOUSTON, TX 77052

Right to Receive Written Statement of Specific Reasons for Denial

If your application is denied during the underwriting process, you may have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Axos Bank at 4350 La Jolla Village Drive, Suite 140, Mailstop SWO-056, San Diego, CA 92122 and telephone 877-351-2265 within 60 days from the date you were notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for statement.

Borrowing Entity: _____ Dated: _____

Authorized signatory

Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Authorized signatory

Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Authorized signatory

Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Authorized signatory

Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Section 9: Hazard Insurance Authorization and Requirements

Listed below are Lender's policies and procedures, and minimum requirements, for the Hazard Insurance which must be provided covering the subject property.

1. Coverage must equal the lesser of the following:
 - Loan amount
 - Total estimate of cost-new from the appraisal report
 - 100% of the insurable value of the improvements, as established by the property insurer
2. The insurance company providing coverage must have a B+ VI rating or better in the latest edition of AM Best Co., must be licensed to do business in the State in which the property is located, and must be licensed to transact the lines of insurance required in this transaction.
3. Policy shall provide at least "Broad Form" coverage on properties of one to four units, and at least "Vandalism & Malicious Mischief" on properties with over four units, with no deviation. Homeowners policies must provide coverage equal to "HO2" form.
4. Policies must contain deductibles on any peril. Deductibles may not exceed the following:
 - For loan amounts < \$1,000,000, the max deductible is 1% of the face amount of the insurance policy or \$5,000 whichever is less
 - For loan amounts ≥ \$1,000,000, the max deductible is \$10,000
5. Loss of rents/business income interruption coverage for the actual loss sustained for up to 6 months with a minimum coverage amount of 6 months' gross rental income (without deduction for actual or potential vacancy).
6. Policy must provide coverage for a term of at least one year. Premiums may be paid on an annual installment basis only if the policy provides that the lender will be notified in writing of cancellation 30 days prior to expiration of coverage, for any cause. Binders are not acceptable unless otherwise required by applicable law.
7. If any existing policy is provided which will expire within 6 months from the date of the recording of this loan, said policy must be renewed for the required term as noted in paragraph 6 above.
8. All forms and endorsements pertaining to the Lender's requirements must appear on the "Declaration Page" of policy.
9. New policies must be accompanied by a signed "Broker of Record Authorization" if borrower(s) has/have changed Insurance Agents.
10. Verification of renewal of insurance policies must be in Lender's office at least thirty days prior to the expiration date of the policy. If this requirement is not met, LENDER AND ITS SUCCESSORS OR ASSIGNS MAY AT THEIR OPTION, BUT WITHOUT THE OBLIGATION TO DO SO, PROVIDE COVERAGE TO REPLACE ANY EXPIRING POLICIES WHICH HAVE NOT BEEN PROPERLY RENEWED. The premium for such coverage will be remitted promptly by the undersigned, or Lender may charge borrower's account for the cost thereof.
11. Lender's loss Payable Endorsement 438 BFU to be affixed to policy in favor of:
 - Axos Bank
 - ISAOA/ATIMA
 - P.O. Box 5804
 - Troy, Michigan 48007-5804
 - Loan Number:
12. The property address and the insured's names must be designated on the policy exactly as on the ALTA Title Policy or CLTA Title Policy (whichever is issued).
13. The Lender's loan number must appear on the policy and on any subsequent endorsements.
14. The effective date of new policies, endorsements, and/or assignments shall be as of, or prior to, the date of recording of this loan.
15. Please notify your agent to forward future premium notices directly to you.
16. If the security property is a condominium, the Master Policy must contain a minimum of \$1,000,000.00 coverage for "Directors & Officers" liability. A copy of the Master Policy, or a certificate showing proof of coverage for both the Homeowners Association and the condominium unit owner, must be submitted to Lender prior to funding.

AN ACCEPTABLE POLICY, WITH ENDORSEMENTS AND/OR ASSIGNMENTS, MUST BE FORWARDED TO AND RECEIVED BY LENDER BEFORE THIS LOAN CAN BE FUNDED; OTHERWISE, LENDER MAY BE FORCED TO PLACE INTERIM COVERAGE ON THE PROPERTY AT AN ADDITIONAL COST TO THE BORROWER(S).

Each of the undersigned acknowledges that he or she has read and understands the foregoing provisions and insurance requirements. This authorization will remain irrevocable for the undersigned as owner(s) of the subject property, and/or any assignees, for as long as this loan remains on the subject property.

Borrowing Entity: _____ Dated: _____

Authorized signatory
Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Authorized signatory
Signature: _____
Print Name: _____
Title: _____
(example: Sole Member, Managing Member, Partner, etc)

Authorized signatory
Signature: _____
Print Name: _____
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