



**AUTHORIZATION**

Signing and submitting this credit authorization authorizes the Lender, its representatives, correspondents and affiliates to:

- Make credit inquiries of existing and prior lenders;
- Make credit inquiries and access credit reports on all Principals, Officers, and Directors of the Borrowing Entity; and
- Access the proposed Security at reasonable times and upon reasonable notice.

**All credit inquiries should be returned to Lender, as follows:**

NCS Commercial Capital, LLC  
1600 Masters Club Drive  
Atlanta, Georgia 30350-4445  
PH: 888-828-4181  
FX: 888-828-4182

The Borrower understands that submission of this Loan Submission Form is solely for use by NCS Commercial Capital, LLC, its affiliates and assigns ("NCS Commercial"), in its consideration of an extension of credit to the Borrower listed above. **This Loan Submission Form creates no commitment on the part of NCS Commercial to extend credit to the Borrower** and no commitment on the part of the Borrower to accept any credit which might be extended by NCS Commercial. If NCS Commercial should decide to offer financing, it will be done so in the form of a **written commitment** fully executed by an authorized officer of NCS Commercial Capital.

Borrower hereby confirms that the information provided by the Borrower and/or Principals on this Loan Submission Form, as well as any subsequent information that might be submitted with this loan request, is true and correct and may be relied upon by NCS Commercial in its consideration of a request to extend credit to the Borrower. Any misrepresentation by Borrower in conjunction with this Loan Fact Sheet or any other information provided by Borrower may be viewed as fraud, and as such may be punishable by law.

If Borrower is a corporation or partnership, complete Exhibit "A" in addition to this authorization.

**Borrower:**

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Social Security No.

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title of Individual

\_\_\_\_\_  
Date

**Co-Borrower(s):**

_____ Name (Please Print)	_____ Date
_____ Social Security No.	_____
_____ Address	_____
_____ Signature	_____ Date
_____ Signature	_____ Date
_____ Signature	_____ Date

Revision Date: 6/1/2006

*This outline contains the current general parameters of the NCS Commercial lending program. All program requirements, parameters and underwriting criteria are subject to change by NCS Commercial without further notice.*

EXHIBIT "A"

CREDIT REPORT AUTHORIZATION AND REFERENCES

Complete a separate sheet for each general partner, guarantor, limited partner owning more than 20%, significant shareholder and corporate officers ("Significant Principal").

Principal's Name:	_____	Principal's Social Security #:	_____
Principal's Current Add:	_____	Principal's Date of Birth:	_____
City, State and Zip:	_____	Home Telephone:	_____
Principal's Prior Add:	_____	Work Telephone:	_____
City, State and Zip:	_____	Employment Address:	_____
			_____
		City, State and Zip:	_____
		Length of Employment:	_____

Please provide the following references:

<u>Banking Reference:</u>		<u>Credit Reference:</u>	
Institution:	_____	Company:	_____
Address:	_____	Address:	_____
City, State:	_____	City, State:	_____
Contact Name:	_____	Contact Name:	_____
Phone Number:	_____	Phone Number:	_____
Fax Number:	_____	Fax Number:	_____
Account Number:	_____	Account Number:	_____

The applicant indicated below hereby authorizes Lender, or one of its correspondents (collectively referred to as "Lender") to (1) obtain from any credit reporting agency such financial and credit reports as Lender considers appropriate including all information regarding past and present mortgages; (2) obtain a Lexis/Nexis search; (3) verify all property indebtedness with the Applicant's creditors; (4) for the purposes of verifying information as the Lender deems appropriate, contact the management agent of the property, the resident manager, the independent accountants who may provide financial statements for the property, and all other persons or entities deemed to be necessary.

In addition to the above, Lender is hereby authorized to verify past and present employment earnings records, bank accounts, stock holdings and any asset balances that are deemed necessary to process this mortgage Loan Application.

It is understood that a photocopy or facsimile of this form will also serve as authorization. The information the Lender obtains is only to be used in the processing of this mortgage Loan Application.

Authorized by:

\_\_\_\_\_  
Borrowing Entity:

By: \_\_\_\_\_  
Name:  
Title:  
Date: