

**HEALTH CARE
Additional Information
Commercial Loan Application**

Please submit this with Pre-Qualification Application

Borrower Name: _____

Borrower contact: _____ E-mail address: _____

Address: _____ City _____ State _____ Zip _____

Phone: () _____ Fax: () _____

Property Information

Property/ Project Name: _____

Address: _____ City _____ State _____ Zip _____

Last Appraisal Value \$ _____ Last Date Appraised _____

Purchase Price \$ _____

Property Subtype:

Nursing Home _____ Congregate Care _____ Assisted Living _____ Other _____

Property Management Contract in place? Yes _____ No _____

Property Attributes:

Cafeterias _____ Pools _____ Laundry Rooms _____ Clubhouse _____ Exercise Rooms _____ Recreation Areas _____

Nursing Stations _____ Security Gates _____ Unlicensed Beds _____ %

Sewage/Waste Treatment facility? Yes _____ No _____

Miles to Hospital Center _____ Level A Deficiencies in the past 2 years? Yes _____ No _____ Don't Know _____

Surrounding Property Land Use: Describe

- 1/ Similar Residential: _____
- 2/ Higher Scale Residential: _____
- 3/ Lower Scale Residential: _____
- 4/ Medical Office: _____
- 2/ Lower Scale Retail: _____
- 3/ Industrial Park: _____
- 7/ Retail: _____
- 7/ Class A-B-C Office: _____
- 8/ Residential: _____
- 9/ Commercial: _____
- 10/ Mixed-Use _____
- 11/ Other: _____

Building Information

Building address: _____ City _____ State _____ Zip _____

Number of Stories: _____ Number of Retail Stores _____ Year Built _____ Last Year Renovated _____

Overall Appearance: Excellent _____ Good _____ Fair _____ Poor _____ Ceiling Fans _____ Microwave _____

Number of Covered Parking Spaces _____ Uncovered _____ Sprinkler System _____ % HVAC _____ %

Structure Type: Block _____ Frame _____ Frame & Brick _____ Corner-Property Yes _____ No _____ Fireplace _____

Air Conditioning _____ Estimated Market Value \$ _____ Gross Building Square Feet _____

Flat Roof ? Yes _____ No _____ Estimated Market Vacancy _____ % Number of Guest Rooms _____ Number of Elevators _____

Exterior Materials T-111 _____ Brick _____ Stucco _____ Block _____ Net Rental Area _____ Square Feet