



Application Form for [Acrobat Reader](#) users

If you have [Acrobat Reader](#), then please print this application, fill it out, and fax it to 212-755-6833.

The following PDF file is for users that do not have the full version of [Adobe Acrobat \(full version\)](#) which allows you to create PDF files.

If you have [Adobe Adobe Acrobat \(full version\)](#) then you can use other application which will allow you to fill in the application on-line, save it on your computer, print it on your printer, sign it, and fax it to us at 212-755-6833.

All applications need to be signed.

If you have any questions, please call Capstone at 212-755-3636.



1350 Avenue of the Americas, 24th Floor, New York, NY 10019
 Tel: 212-755-3636 Fax: 212-755-6833

PERSONAL FINANCIAL STATEMENT

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more voting stock, or (4) any person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State & Zip Code	

Business Name of Applicant/Borrower

ASSETS (omit cents)		LIABILITIES (omit cents)	
Cash on hand & in Banks		Accounts Payable	
Savings Accounts		Notes Payable to Banks and Others (Describe in Section 2)	
IRA or Other Retirement Account		Installment Account (Auto) Mo. Payments	
Accounts & Notes Receivable		Installment Account (Other) Mo. Payments	
Life Insurance-Cash Surrender Value Only (complete Section 8)		Loan on Life Insurance	
Stocks and Bonds (Describe in Section 3)		Mortgages on Real Estate (Describe in Section 4)	
Real Estate (Describe in Section 4)		Unpaid Taxes (Describe in Section 6)	
Automobile-Present Value		Other Liabilities (Describe in Section 7)	
Other Personal Property (Describe in Section 5)		Total Liabilities	
Other Assets (Describe in Section 5)		Net Worth	
Total		Total	

Section 1. Source of Income		Contingent Liabilities	
Salary		As Endorser or Co-Maker	
Net Investment Income		Legal Claims & Judgments	
Real Estate Income		Provisions for Federal Income Tax	
Other Income (Describe below*)		Other Special Debt	
Description of Other Income in Section 1			

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency	How Secured or Endorsed Type of Collateral



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Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)			
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of the lien, terms of payment and if delinquent, describe delinquency.)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries.)

I authorize Lender to make inquires as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature:	Date:	Social Security Number:
Signature:	Date:	Social Security Number:

Once the application is complete, or partially complete, click the save button (located on the Acrobat toolbar) and save the application on your personal computer.
 Also , please print, sign and send the completed application to Capstone by fax at 212-755-6833.