

Property Operating Statement

Note: Only required to be completed for Investment property.

Applicant Name: _____ Phone Number: _____

Complete Address of Collateral Property:

Street: _____

City: _____ State: _____ Zip: _____

Annual Period: _____

INCOME:

Total Annual Rents Received	_____
Other Annual Income (parking, bill boards, laundry, etc)	_____
Total Potential Gross Income (PGI)	_____
Vacancy and Collection Loss (10%)	_____

EFFECTIVE GROSS INCOME (EGI):

EXPENSES:

Advertising	_____
Auto and travel	_____
Cleaning and maintenance	_____
Commissions	_____
Insurance	_____
Legal and other professional fees	_____
Management fees	_____
Repairs	_____
Supplies	_____
Real Estate Taxes	_____
Utilities	_____
Other	_____

TOTAL EXPENSES:

Total Annual Net Operating Income:	_____
Monthly Net Operating Income:	_____
Monthly Net Operating Income at 1.2 DSC:	_____
Less: Current Monthly First Mortgage Payment:	_____
Maximum Monthly Payment Available:	_____

Signature _____ Date _____

Signature _____ Date _____