*** PLEASE READ ***

Please complete the five (5) page Loan Application in its entirety, then print and provide a 'wet signature' where signatures are required. Axos Bank cannot accept a Loan Application that contains an electronic PDF signature or where a name/signature was typed in.

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



Single Family Lending Loan Application

(Only to be completed by Borrower/Borrowing Entity)

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	<i></i>								
Name of Guarantor(s):									
	entity (trust, partnership, c be assessed if the propos		of the Borrowing E	Entity is char	nged after this	s application	is submitted.		
Borrower(s) will be (selec	t 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:									
Please use this man to ou	ıtline the organizational s		2: Vesting Tre	е					
	ructure does not fit into th			gly or provia	le an organiza	ntional chart i	n similar forn	nat and	
Is the Borrowing Entity:									
Yes	No A Single Ass								
Yes Yes	No A Domestic No A newly form	Entity med or to-be-formed e	ntitu						
_ — —	on multi-asset entities an								
·			g Entity Legal Name]				
	(Entity Type)			1					
		(State of Organization)			1				
		(Date Formed)]				
		(Tax ID#)			1				
					1				
(Entity	Name)	(E	ntity Name)			(Entity	Name)		
(Entity	(Entity Type)*			(Entity Type)*					
(Entity/Individual Role)**		(Entity/Individual Role)**		(Entity/Individual Role)**					
						(Charles of Co		(2) (2)	
(State of Organization)	(% of Ownership)	(State of Organization	on) (% of Owi	nership)	(State of Organization) (% of Owners)		vnership)		
								l L	
(Entity Name)	(Entity Name)	(Entity Name)	(Entity I	Name)	(Entity Name) (Entity Na		Name)		
(Entity Type)*	(Entity Type)*	(Entity Type)*	(Entity 1	Гуре)*	(Entity Type)* (Entity Ty		Type)*		
(Entity/Individual Role) **	(Entity/Individual Role) **	(Entity/Individual Ro	ole) (Entity/Indiv	•	(Entity/Individual Role) (Entity/Individual Role) **		· 1		
(State of (% of	(State of (% of	(State of (% o	f (State of	(% of	(State of	(% of	(State of	(% of	
Org.) Owners)	Org.) Owners)	Org.) Owne	rs) Org.)	Owners)	Org.)	Owners)	Org.)	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.									
Charact Add		Section 3: Subje	ct Property Inf			1_			
Street Address			City			, , , , , , , , , , , , , , , , , , ,			
Management Company (if a	Management Compa	ny Contact Name			Phone Number ext.				
Mailing Address (if different	than guarantor's address			Em	ail Address (if	different tha	n guarantor's	<u> </u>	

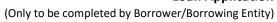


Single Family Lending Loan Application

(Only to be completed by Borrower/Borrowing Entity)

Section 4: Purpose of Loan							
ien Status First Second Property has how many outstand		how many outstanding liens	s/loans?	Property 0	Property Owned Free and Clear		
Purchase	Purchase Price	Cash Down Paymer	nt Source of Down Paymen	nt Es	timated Closing Date		
Refinance: Rate & Term	Date Acquired	Purchase Price	Primary Lien Balanc	e Secon	dary Lien Balance		
Refinance: Cash Out Cash Out Purpose: Cash Reserves Investment, Add Debt Consolidati Home Improvem Property Improve Purchase Anothe Single Form Multi-Fa	on nent (personal resident (subject property amily Home, Addreamily Residence, A rcial Property, Add please explain	ess ddress dress					
I/we understand that Lender is consi affirm the truthfulness of this staten	nent.		on the above purpose stateme	ent. By signing this fo	rm, I/we warrant and		
Current Lender/Creditor's Name		Mailing Address					
Name of Depository		City		ate	Zip Code		
Loan #		Fax Number	Email Address		•		
•	itional or supplem funds due and that e following address asurance (Hazard a ired. Act prohibits credito is the capacity to entire in good faith exerci	and/or Flood) impounds may are from discriminating against of the into a binding contract); becaused any right under the Consuits	or be required as a condition of loc credit applicants on the basis of rac cause all or part of the applicant's in mer Credit Protection Act. The Fed	oan approval. You wil ce, color, religion, nation ncome derives from any	l be notified at Loan nal origin, sex, marital public assistance		
The undersigned specifically acknowl contained in and provided in connect undersigned certifies that the information signature(s) on this application. The liability and/or criminal penalties included and liability for monetary damages to been made in connection with this approving Entity:	edges and agrees to the comment of t	that Axos Bank®, including it cation and all such informat and given in connection with owledges that any intentional ited to, fine or imprisonment other person or entity who be also be a base of the part of th	ion is given for the purposes of a this application is true and correct or all or negligent misrepresentation to both, under the provisions may suffer any loss due to relian Dated: uthorized signatory ame	obtaining the loan independent of the date set one of such information of Title 18, United Stance upon any misrep	dicated above. The forth opposite the n may result in civil tes Code, Section 1014 resentation which have		
Authorized signatory X		Date A	uthorized signatory		Date		
Name	Title	N	ame	Title	•		







Guarantor/Trustee 3 signature

and Improven order to induce th 1. Warranties ar		(the "Borrower") secured by Real Property		
Warranties ar	nents located at:			
Warranties ar	e Lender to make the Loan, and for other valuable	consideration. Borrower agrees as follows:		
have been dis otherwise spe	nd Representations. Borrower warrants and represe to orrower who are to be paid any commission, finder closed in writing by Borrower to Lender prior to the cifically identified in the disclosures made by Borro	sents to the Lender that (a) the names of all brokers, agents and finders acting for or r's fee, brokerage fee or other compensation of any kind in connection with the Loan e date of Borrower's execution of this Borrower's Certification; and (b) except as over pursuant to clause (a) of this Section, Borrower is not represented in the Loan ware of any other commissions, finder's fees or brokerage fees due in connection with		
representative expenses, incl finder's fees, o Borrower; and	es, shareholders, affiliates, successors and assigns h uding costs of defense and attorney's fees, in conno or brokerage fees to the Broker pursuant to the teri	nify and hold the Lender and its officers, directors, agents, attorneys, employees, narmless from and against any and all liabilities, claims, demands, damages, costs and ection with any or all of the following: (a) the Lender's payment of any commissions, ms of any of the Loan documents executed by Borrower or any other authorization by or brokerage fees in connection with the Loan which arise out of any act, omission or		
Borrower Cert is in writing ar Lender institu be entitled to	tification. No waiver by the Lender of any of its righ nd signed by the Lender. This Borrower Certificatio tes an action or proceeding to enforce its rights und	cation are for convenient reference only and shall not be used in interpreting this ats or remedies under this Borrower Certification shall be effective unless such waiver in shall be governed by and interpreted under the laws of the State of California. If the der the Borrower Certification, the prevailing party in such action or proceeding shall 'fees and costs in addition to any other relief awarded by the court. Borrower extification in closing the Loan.		
Borrowing Ent	tity:	Dated:		
Authorized signato	pry	Authorized signatory		
_		- · · ·		
Title:		Title:		
(example:	: Sole Member, Managing Member, Partner, etc)	(example: Sole Member, Managing Member, Partner, etc)		
Authorized signato	Dry	Authorized signatory		
,		Signature:		
Signature:				
		Print Name:		
Title: (example:	: Sole Member, Managing Member, Partner, etc)	Title:		
	Section 7: Cr	edit Authorization Release		
		successors, and assigns, ("Bank") to verify my bank records, credit history, and any		
	deemed necessary in connection with the Borrowe			
i understand that a		ill be ordered from a consumer-reporting agency prior to loan closing as part of the n may be necessary to verify one or more of my credit references. I authorize this us		
	photocopy be honored.	minay be necessary to verify one of more of my credit references. Fauthorize this as		
application proces	· · · · · · · · · · · · · · · · · · ·	above authorizations and certifies that the information provided herein is true and		
application proces and request that a By signing below, t				
application proces and request that a By signing below, t correct. The unde		ed may be disclosed to applicant, any prospective borrower or guarantor of the loan		
application proces and request that a By signing below, t correct. The unde	ny of their representatives, employees, and affiliate	s.		
application proces and request that a By signing below, t correct. The unde applied for, and ar		S. Guarantor/Trustee 2		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal):	ny of their representatives, employees, and affiliate	s.		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no	Guarantor/Trustee 1 Date of Birth: P.O. Boxes):	SSN: Date of Birth: Home Address (no P.O. Boxes):		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Coc	Guarantor/Trustee 1 Date of Birth: P.O. Boxes):	S. Guarantor/Trustee 2 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code:		
application proces and request that a By signing below, t correct. The unde	Guarantor/Trustee 1 Date of Birth: P.O. Boxes):	SSN: Date of Birth: Home Address (no P.O. Boxes):		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Coc Marital Status Married	Date of Birth: O P.O. Boxes): Unmarried Separated	Guarantor/Trustee 2 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status Married Unmarried Separated		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Coc Marital Status Married	Date of Birth: O P.O. Boxes): Unmarried Separated domestic partner/equivalent in another state ("RDi	S. Guarantor/Trustee 2 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status Married Unmarried Separated P") CA registered domestic partner/equivalent in another state ("RDP")		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Cod Marital Status Married CA registered	Date of Birth: O P.O. Boxes): Unmarried Separated	Guarantor/Trustee 2 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status Married Unmarried Separated P") CA registered domestic partner/equivalent in another state ("RDP") Guarantor/Trustee 4		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Coc Marital Status Married CA registered Name (legal): SSN:	Date of Birth: OP.O. Boxes): Unmarried Separated domestic partner/equivalent in another state ("RDI Guarantor/Trustee 3 Date of Birth:	Guarantor/Trustee 2 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status Married Unmarried Separated P") CA registered domestic partner/equivalent in another state ("RDP") Guarantor/Trustee 4 Name (legal): SSN: Date of Birth:		
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application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Cod Marital Status Married CA registered Name (legal): SSN: Home Address (no	Date of Birth: Unmarried Separated Guarantor/Trustee 3 Date of Birth:	S. Guarantor/Trustee 2 Name (legal): SSN: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status Married Unmarried Separated P") CA registered domestic partner/equivalent in another state ("RDP") Guarantor/Trustee 4 Name (legal): SSN: Date of Birth: Home Address (no P.O. Boxes): City, State, ZIP Code: Marital Status		
application proces and request that a By signing below, t correct. The unde applied for, and ar Name (legal): SSN: Home Address (no City, State, ZIP Coc Marital Status Married CA registered Name (legal): SSN: Home Address (no City, State, ZIP Coc Marital Status Married	Date of Birth: Unmarried Separated domestic partner/equivalent in another state ("RDi Guarantor/Trustee 3 Date of Birth:	S. Guarantor/Trustee 2		

Guarantor/Trustee 4 signature

Date

Date



Single Family Lending Loan Application

(Only to be completed by Borrower/Borrowing Entity)

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 <u>not required</u> 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 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	Authorized signatory		
Signature:	Signature:		
Print Name:	Print Name:		
Title:	Title:		
Authorized signatory	Authorized signatory		
Signature:	Signature:		
Print Name:	Print Name:		
Title:	Title: (example: Sole Member, Managing Member, Partner, etc)		



(Only to be completed by Borrower/Borrowing Entity)



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 an 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 $\ge $1,000,000$, 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	Authorized signatory
Signature:	Signature:
Print Name:	Print Name:
Title:(example: Sole Member, Managing Member, Partner, etc)	Title:(example: Sole Member, Managing Member, Partner, etc)
Authorized signatory	Authorized signatory
Signature:	Signature:
Print Name:	Print Name:
Title:	Title: