

## **Homeowner Association Lending Inquiry**

Association	Board Contact		Taxpayer Identification Number		
Address		State	Zip Code		
Phone Number	Email				
Management Company		 Managem	nent Contact		
Address		State	Zip Code		
Phone Number	Email				
Attorney		Attorney (	Contact		
Address		State	Zip Code		
Phone Number	Email				
Insurance Company		Insurance Contact			
Address		State	Zip Code		
Phone Number	 Email				

Year Association was declared	Loan purpose		Total project cost	Rec	quested loan amount
Number of buildings	Number of units	Percentage of units o	wner occupied	Percentage of u	ınits owned by Banks
Percentage of units owned by	Governments				
Current Units Delinquent	Current Units Pen	ding Foreclosures	Current Units Pe	ending Lawsuits (i	f any, describe below)
Current Monthly Common Ch Please describe any special as		ounts and term.			
Please describe any other lon	g-term debt obligatio	ons of the Association.			
Loan Purpose		Total Project Co	st	Requested	Loan Amount
Expected Requested Term in `	<b>Y</b> ears	Are ther	e capital improvem	nent plans? Yes	No
Amount of Fund Balance	Reserve A	mounts (if any)			
Please describe Association as	menities				

Upon submission of this inquiry, a representative of our Business Banking team will contact you to discuss the next steps. Should you have any questions regarding this inquiry or Association Lending at Ion Bank, please contact:

Robert A. Mezzo VP, Commercial Banking CAI Educated Business Partner 203.720.2627 or 203.525.0108 rmezzo@ionbank.com

Individual submitting this inquiry:					
First Name	Middle Initial	Last Name			
Association Position	ociation Position		Ownership Interest		
Phone Number		Email Address			