



CARLYLE
CAPITAL

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[/ Connect carlylecapitalinc.com](http://Connect.carlylecapitalinc.com)

BROKER

Date _____
Name _____
Phone _____
Email _____

BORROWER OBJECTIVE	
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PROPERTY INFORMATION	Address _____		
	Property Type	<input type="checkbox"/> SFR	<input type="checkbox"/> MF # Units _____
	Loan Type	<input type="checkbox"/> Purchase	<input type="checkbox"/> Refi
	Renovations	<input type="checkbox"/> No Renovations	<input type="checkbox"/> Light
	Occupancy	<input type="checkbox"/> Moderate	<input type="checkbox"/> Heavy
Commercial: Type _____			
<input type="checkbox"/> Other _____			
For cash flowing properties:			
Gross Income: \$ _____ Expenses: \$ _____ NOI: \$ _____			
Details if Stabilization Required: _____			

LOAN REQUEST	Provide information dependent on transaction type:		Loan Term: _____ (months)
	Purchase Price:	Purchase Date: _____	LTPP:
	As-Is Value:	Requested Initial Advance:	LTV:
	Rehab Costs:	Requested Holdback:	LTC:
		Desired Loan Amount:	Budget/Value:
	After Repair Value:		ARV:
Expectations for cost of capital, broker fee, and closing date			

VALUES	Appraised Value:	Improvements since Purchase:
	Existing Debt 1st:	Lender: _____ Current: _____
	Existing Debt 2nd:	Lender: _____ Current: _____

BORROWER INFORMATION	Borrower Name _____	Borrower Email _____
	Annual Income: _____	Liquidity: _____
	US Citizen?: _____	Net Worth: _____
	Borrower History of: _____	Mid FICO: _____
	Borrowing Entity Name: _____	
Borrowing Entity Address: _____		

BORROWER EXPERIENCE	
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USE OF FUNDS	
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EXIT STRATEGY	
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Internal Use Only

Application _____ Borrower _____ Experience _____ Location _____ Liquidity _____ Value _____
Amount _____ Rate _____ Term _____ Pts _____ LTV _____ PPP _____ DD _____ Welc _____

