

Church Loan Application

CONTACT INFORMATION

Street Address:	
City, State, ZIP Code:	
Contact Name:	
Phone:	
Fax:	
E-Mail Address:	
Fed ID Number:	
Pastor's Name:	
Church Name:	

PURPOSE OF LOAN

<input type="checkbox"/> Purchase of Property:	\$:
<input type="checkbox"/> Refinance Existing Loan:	\$:
<input type="checkbox"/> New Construction:	\$:
<input type="checkbox"/> Renovate Existing Property:	\$:

LOAN DETAILS

Loan amount requested:	\$:
Repayment term requested:	<input type="checkbox"/> 5yrs. <input type="checkbox"/> 7yrs. <input type="checkbox"/> 10yrs. <input type="checkbox"/> 15yrs.
Maturity date of current loan in refinancing:	

WHAT IS THE GOAL OR OBJECTIVE OF YOUR CHURCH'S REFINANCE?

To accelerate payoff:	<input type="checkbox"/> Yes <input type="checkbox"/> No
To lower monthly payments:	<input type="checkbox"/> Yes <input type="checkbox"/> No

VALUATION OF PROPERTY

Legal description:

Located in which county:

Name on deeds:

Location of deeds:

Approximate value of existing property:

\$:

Approximate value of property to be acquired (if applicable):

\$:

MEMBERSHIP STATISTICS

NUMBER OF CHURCH MEMBERS	WORKING ADULTS	RETIRED ADULTS	YOUTH	CHILDREN
2017:				
2018:				
2019:				

Total number of households:

Number of giving units:

FINANCIAL POSITION

Annual Income:

2016 - \$:

2017- \$:

2018- \$:

2019 -ytd

Current balance in church operations:

\$:

Current balance in building fund:

\$:

Current balance in savings account:

\$:

Certificate(s) of deposit:

\$:

TOTAL BALANCE OF ALL FUNDS:

\$:

Value of other assets:

\$:

CURRENT LOAN AND INSURANCE INFORMATION:

Current lender:	
Current term:	
Current collateral value:	
Current interest rate:	
Current insurer:	
Current insured amount:	
Is your insurance current?	
Renewal date of your insurance:	

BUDGET AND INTERNAL CONTROLS:

Please provide accurate answers.

Current National Budget:	
Is your National Budget current?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Current District Budget Amount?	\$:
Is your District Budget current?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your church aligned with COGBF's System of Internal Controls?	<input type="checkbox"/> Yes <input type="checkbox"/> No

What electronic system is your church using to maintain their financial records?

<input type="checkbox"/> Quicken	<input type="checkbox"/> QuickBooks	<input type="checkbox"/> Other _____
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ITEMS REQUESTED:

Payoff statement from current lender:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Acknowledgement from District Superintendent and/or Finance Board:	<input type="checkbox"/> Yes <input type="checkbox"/> No
3-years of Financial Records:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of Insurance:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mortgage statements for past 6-months:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bank statements for past 3-months:	<input type="checkbox"/> Yes <input type="checkbox"/> No

OUR POLICY:

It is the policy of this organization to make sound financial decisions to assist in the further growth and edification of the body of Christ.

We have read the Policies and Regulations for securing a Mortgage Refinance Loan with COGBF Financial Solutions and are in agreement with the terms and conditions as stated in the policy. All answers included in this application are accurate and verifiable.

Print Name & Title:	
Authorized Signature:	Date:
Print Name & Title:	
Authorized Signature:	Date: