

AIRCRAFT LOAN APPLICATION



Mail: 871 Venetia Bay Blvd.,
 Suite 310
 Venice, FL 34285
Email: apply@rockaviation.com
Fax: 941.870.9645

I. AIRCRAFT INFORMATION

Year, Make and Model of Aircraft		Serial Number		FAA Registration Number
Total Time Airframe		SMOH (since major over haul)		STOH (since top over haul)
Purchase Price	Cash Down Payment	Amount To Be Financed	Repayment Time/Desirable Monthly Payment	
Insurance Company		Name of Agent		Phone ()

How did you hear about us?

II. PERSONAL FINANCIAL STATEMENT

NAME _____ DATE _____, 20 ____

The following is submitted for the purpose of procuring, establishing and maintaining credit with you on behalf of the undersigned or persons, firms or corporations in whose behalf the undersigned may execute a guaranty in your favor. The undersigned warrants that this financial statement is true and correct and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned.

PLEASE DO NOT LEAVE ANY QUESTIONS UNANSWERED. USE "NO" OR "NONE" WHERE NECESSARY.

If additional schedules are used, please sign, date and attach them to this form.

ASSETS	In Whole Dollars	LIABILITIES	In Whole Dollars
Cash on hand and in banks		Notes Payable to banks-	
Marketable Securities –			
		Amounts payable to others -	
Stocks			
		Accounts and bills due	
Real Estate Owned		Real Estate mortgages payable	
Loans Receivable		Unpaid income tax	
Automobiles		Automobile Loans	
Boats, RV's, Cycles, Aircraft		Boats, RV's, Cycles, Aircraft	
Other assets – itemize		Other debts – itemize	
		TOTAL LIABILITIES	
		NET WORTH	
		(Subtract Total Liabilities from total Assets)	
TOTAL ASSETS			

Income taxes settled through what date? _____ Additional assessments \$ _____

Do you have any contingent liabilities? YES ___ NO ___ If yes - give details:	Are you a partner or officer in any other venture? YES ___ NO ___ If yes - describe:
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Have you ever filed bankruptcy? YES ___ NO ___
If yes – explain:

Are you a defendant in any suits or legal actions or have you any outstanding judgements?
YES ___ NO ___ If yes – explain:

Applicant's Signature X	Date	Co – Applicants Signature X	Date
Joint Credit – We intend to apply for joint credit	Applicant Initial	X	
	Co – Applicant Initial	X	

III. ACKNOWLEDGEMENT AND AGREEMENT

The undersigned specifically acknowledge(s) and agree(s) that: (1) the loan requested by this application will be secured by a first lien on the aircraft indicated in this application; (2) the aircraft will not be used for any illegal purpose or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) verification or re-verification of any information contained in the application may be made at any time by the Lender, its agents, successors and assigns, either directly or through a credit reporting agency, from any source named in this application, and the original copy of this application will be retained by the Lender, even if the loan is not approved; (5) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/we have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (6) in the event my/our payments on the loan indicated in this application become delinquent, the Lender, its agents, successors and assigns, may, in addition to all their rights and remedies, report my/our name(s) and account information to a credit reporting agency; (7) ownership of the loan may be transferred to successor or assign of the Lender without notice to me and/or the administration of the loan account may be transferred to an agent, successor or assign of the Lender with prior notice to me; (8) the Lender, its agents, successors and assigns make no representations or warranties, express or implied, to the Borrower(s) regarding the aircraft, the condition of the aircraft, the value of the aircraft, or the status of the aircraft title, prior liens or tax liens.

Certification: I/we certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon and misrepresentation which I/we have made on this application.

Applicant's Signature X	Date	Co – Applicants Signature X	Date
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IV. APPLICANT INFORMATION

Full Name		Social Security No.		Home Phone ()		Birth Date		No. of Dependents	
Present Street Address		City		State		Zip		How Long?	
U.S. Citizen Yes ___ No ___	Marital Status: Married/Unmarried/ Separated	Own ___ Rent ___	Rent/Mortgage Payment \$		If owned: Jointly ___ Solely ___		Value \$	Mortgage Balance	
Former Street Address		City		State		Zip		How Long?	
Employer		Business Phone ()		Position or Title		Hire Date Mo. ___ Yr. ___			
Monthly or Annual Income \$		Other Income (Describe)* \$		*Alimony, child support or maintenance payments are optional information and need not be reported if the applicant does not choose to rely on such income in applying for credit.					
Former Employer (if less than 3 years at current place of employment)				Business Phone ()		Employed from Mo. ___ Yr. ___		To Mo. ___ Yr. ___	
Nearest Relative Not Living With You Name: _____ Address: _____ Phone: () _____									

V. PERSONAL FINANCIAL OBLIGATIONS AND/OR CREDIT REFERENCES (List all mortgages, auto, boat, aircraft, and personal loans)

Creditor Name and Address	Phone	Account Number	Current Balance (\$)	Monthly Payment (\$)
	()			
	()			
	()			
Personal Primary Bank		Phone ()		Checking Account Number

VI. CO – APPLICANT INFORMATION

CO - APPLICANT Applicant's spouse must complete the section below if the applicant is relying on the spouse's income as a basis for repayment of credit, or if the applicant resides in Arizona, California, Hawaii, Idaho, Louisiana, Michigan, Nebraska, Nevada, New Mexico, Oklahoma, Oregon, Texas or Washington.

Full Name		Social Security No.	Home Phone ()	Birth Date	No. of Dependents	
Present Street Address		City	State	Zip	How Long?	
U.S. Citizen Yes ___ No ___	Marital Status: Married/Unmarried/ Separated	Own ___ Rent ___	Rent/Mortgage Payment \$	If owned: Jointly ___ Solely ___	Value \$	Mortgage Balance
Former Street Address		City	State	Zip	How Long?	
Employer	Business Phone ()		Position or Title		Hire Date Mo. ___ Yr. ___	
Monthly or Annual Income \$	Other Income (Describe)* \$		*Alimony, child support or maintenance payments are optional information and need not be reported if the applicant does not choose to rely on such income in applying for credit.			
Former Employer (if less than 3 years at current place of employment)			Business Phone ()	Employed from Mo. ___ Yr. ___	To Mo. ___ Yr. ___	
Nearest Relative Not Living With You						
Name:		Address:		Phone ()		

VII. PLEASE COMPLETE THIS SECTION IF SELF-EMPLOYED OR BUYING IN BUSINESS NAME

Name of Corporation, Partnership or Proprietorship. Use Legal Name. Do Not Write "SELF".		Principals	% Ownership	Title
Address				
Phone ()	Type of Business Corporation ___ Partnership ___ Proprietorship ___			
State & Date of Incorporation	Federal I.D. Tax No. (E.I.N.)	Fiscal Year End		

VIII. BUSINESS FINANCIAL OBLIGATIONS AND/OR CREDIT REFERENCES (LIST ALL)

Creditor Name and Address	Phone	Account Number	Current Balance (\$)	Monthly Payment (\$)
	()			
	()			
	()			
Primary Bank	Phone ()	Checking Account Number		

IX. FEDERAL EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the has the capacity to enter into a binding contract); because all or part of the applicants income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with the law concerning this is the **Federal Deposit Insurance Corporation – Division of Compliance and Consumer Affairs, Washington, D.C. 20429-9990.**

Applicant's Signature X	Date	Co – Applicants Signature X	Date
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