



7505 General Aviation Drive ▪ Fort Meade, MD 20755 ▪ Tel 410-956-9578 ▪ Fax 410-956-9579

APPLICANT'S FULL NAME		SOCIAL SECURITY #		
STREET ADDRESS, (NO PO BOXES PLEASE) YEARS THERE		CITY, STATE, AND ZIP		
DATE OF BIRTH		HOME PHONE & E-MAIL ADDRESS		
PREVIOUS STREET ADDRESS (If less than 2 years at current address.)		CITY, STATE, AND ZIP		
ANNUAL INCOME FROM SALARY \$		OTHER ANNUAL INCOME \$		
EMPLOYER'S NAME		ARE YOU SELF-EMPLOYED?		
EMPLOYER'S STREET ADDRESS INCLUDING CITY STATE & ZIP		PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS WITH CURRENT EMPLOYER)		
EMPLOYER'S PHONE #		PREVIOUS TITLE OR POSITION ~ YEARS THERE		
TITLE OR POSITION ~ YEARS THERE		ARE YOU A PILOT? ~ ARE YOU A U.S. CITIZEN?		
IN WHAT NAME WILL AIRCRAFT BE REGISTERED?		TAX ID # (IF CORPORATE REGISTERED)		
WHERE WILL AIRCRAFT BE BASED?		PILOT LICENSE # ~ RATINGS & CERTIFICATES		
MONTHLY MORTGAGE OR HOUSING EXPENSE		ANY BANKRUPTCY FILINGS		
PURPOSE OF LOAN -(Circle one) PURCHASE REFINANCE RE-ENGINE/REFURBISH ~ COMMERCIAL USE? YES NO				
YEAR	MAKE	MODEL	N#	SERIAL#
TOTAL AIRFRAME TIME		TOTAL ENGINE TIME SMOH		DATE NEXT ANNUAL DUE
LIST ANY AVIONICS OR EQUIPMENT OTHER THAN STANDARD, (if you have a spec sheet please attach)				AGE OF PAINT & INTERIOR
PLEASE BE SURE TO COMPLETE BOTH SIDES AND SIGN APPLICATION				

PURCHASE PRICE	DOWN PAYMENT AMOUNT
TOTAL FINANCING REQUIRED	NUMBER OF MONTHS REQUESTED 240 Months
NAME OF SERVICE CENTER (If Referral)	ARE YOU (Circle One) APPLICANT CO-APPLICANT

PERSONAL FINANCIAL STATEMENT

ASSETS	ITEMIZE	IN EVEN DOLLARS	LIABILITIES	ITEMIZE	IN EVEN DOLLARS
CASH ON HAND IN BANKS		\$			
MARKETABLE SECURITIES, STOCKS, BONDS, ETC.		\$	LISTAMOUNTS		\$
		\$	PAYABLE TO BANK		\$
		\$	FINANCE COMPANIES, AND OTHERS		\$
LIFE INSURANCE CASH VALUE		\$			\$
REAL ESTATE OWNED (From schedule below and front)		\$			\$
PARTIAL INTEREST IN REAL ESTATE EQUITY (From schedule below)		\$	CONTINGENT LIAB.		\$
AUTOMOBILES		\$	AUTO LOANS		\$
		\$	TOTAL		\$
OTHER PERSONAL PROPERTY (TOTAL)		\$	REAL ESTATE MORTGAGES	FROM CHART BELOW	
OTHER ASSETS		\$	TOTAL LIABILITIES		\$
		\$	NET WORTH (Total Assets -Total Liabilities)		\$
TOTALASSETS		\$	TOTAL LIABILITIES AND NET WORTH		\$

CREDIT REFERENCES (Please list all current debts. Include credit cards, bank, credit union, finance or loan companies, stores, etc.)

LENDER NAME & ADDRESS ~ NAME IN WHICH ACCOUNT IS CARRIED	ACCT. NUMBER	ORIGINAL AMOUNT	BALANCE DUE	MONTHLY PAYMENT
Mortgage №1		\$	\$	\$
Mortgage №2		\$	\$	\$
Auto №1		\$	\$	\$
Auto №2		\$	\$	\$
Other №1		\$	\$	\$
Other №2		\$	\$	\$
Other №3		\$	\$	\$
ALIMONY AND CHILD SUPPORT OBLIGATIONS				\$
REAL ESTATE	ADDRESS CITY AND STATE	Market value	Current mort. amt.	Month.paymt
PROPERTY № 1		\$	\$	\$
PROPERTY № 2		\$	\$	\$
PROPERTY № 3		\$	\$	\$

IF YOU HAVE MORE DEBTS, ATTACH A SEPARATE SHEET. THIS MUST BE SIGNED AND DATED

I/We authorize you and your affiliates to obtain such information as you may require concerning the statements made in this application and agree that the application will remain the property of Ultra Aviation Services, Inc. and its affiliates whether or not the request is granted. The undersigned warrants that the information provided is true and complete and that we may consider- this statement as continuing to be true and correct until advised in writing of a change by the undersigned. The Federal Equal Credit Opportunity Act requires that all creditors, including banks and others, make credit equally available to all creditworthy applicants.

TO APPLY FOR AN AIRCRAFT LOAN, THIS APPLICATION MUST BE RETURNED TO Ultra Aviation Services, Inc. ACCOMPANIED BY COPIES OF THE APPLICANT'S LAST TWO YEARS FEDERAL TAX RETURNS. IF SENT BY E-MAIL THE APPLICANT'S NAME AND SOCIAL SECURITY NUMBER MUST BE PRINTED BELOW TO COMPLETE THE APPLICATION PROCESS. THAT ACT WILL CONSTITUTE A LEGAL SIGNATURE.

SIGNATURE _____ **SSN** _____ **DATE** _____