

REQUIREMENTS

- COVER LETTER REQUESTING A LOAN IN THE AMOUNT OF.
- APPLICATION, ATTACHED TO THIS FORM.
- THERE WILL BE CORPORATE OR PERSONAL FINANCIAL STATEMENTS.
- RESUMES ON PRINCIPALS.
- AREA MAPS.
- IF REQUIRED, PROJECTS PICTURES OR ARTISTS SKETCH.
- COST AND EXPENSES BREAKDOWNS DONE WEEKLY.
- PLANS/SPECIFICATIONS.
- LAND AT COST WITH PROOF OF OWNERSHIP.
- CURRENT APPRAISAL AND VALUE WITH GUIDELINES.
- PRO-FORMA STATEMENT (5) YEARS.
- COPIES OF DEEDS/TITLE REPORT/LEASES/RENT ROLLS, PERMITS TO DATE.
- PAST AND CURENT OPERATING STATEMENTS
- DISBURSMENT SCHEDULE SHOWING YOUR USE OF PROCEEDS

NOTE: All financial statements, compilation or review quality (if un-audited) and must be complete with notes and schedules in all respects.

(A) Federal tax returns for the past three years (corporate and personal include 2002)

(B) Feasibility Study of the project and/or MAI or equivalent appraisal on all aspects of the projections, debt service information, narratives, layouts, plots, photographs or artist's renderings, permits and licenses, as appropriate.

(C) If real estate is involved such as a purchase or refinancing a copy of title report or ALTA title policy may be required on the property in question if appropriate.

Application for United Insurance Credit Enhancement

For the purpose of applying for a commercial credit, I furnish the following statement, overview, documents and related financial and historical information.

NOTE: THIS APPLICATION MUST BE COMPLETED IN ALL RESPECTS, DATED AND SIGNED BY APPLICANT. YOUR APPLICATION DEPENDS UPON DETAILS OF ADDRESSES AND TELEPHONE NUMBERS BEING INSERTED WERE INDICATED.

NAME OF PROJECT: _____

1. NAME OF APPLICANT: _____

IF CORPORATION SHOW NAME EXACTLY AS IT APPEARS ON CORPORATE CHARTER. IF SOLE PROPRIETORSHIP OR PARTNERSHIP, SHOW TRADE STYLE, IF ANY. (SUB-S CHAPTER)

2. BUSINESS ADDRESS: _____

PHONE: _____

FACSIMILE: _____

A. CASH DOLLARS REQUIRED: \$ _____ USD

B. TERM: _____

C. APPRAISED VALUE OF PROJECT: \$ _____

D. BORROWERS NET WORTH: \$ _____ U. S. D.

E. EXPLAIN IN DETAIL PURPOSE OF REQUEST: _____

3. NAME AND TYPE OF CORPORATION _____

Date Established _____ In What State _____

NAME OF OFFICERS	% OWNED	RESIDENCE ADDRESS	ZIP
PRESIDENT	_____	_____	_____
VICE PRES.	_____	_____	_____
SECRETARY	_____	_____	_____
TREASURE	_____	_____	_____

IF YOU BECOME INCAPACITATED, GIVE NAME AND ADDRESS OF PERSON WHO COULD COMPLETE THE PROJECT: _____

4. BANK REFERENCES: NAME ADDRESS OFFICERS NAME PHONE NUMBER

5. DO YOU, YOUR COMPANY, ANY OFFICER OR PARTNER HAVE ANY OTHER BUSINESS INTERESTS OR AFFILIATES? _____

6. NAMES AND ADDRESS OF ATTORNEY: _____

7. NAMES AND ADDRESS OF ACCOUNTANT: _____

8. ON WHAT ACCOUNTING BASIS ARE YOUR FINANCIAL STATEMENTS PREPARED?

CASH ACCRUAL

9. ARE YOUR STATE AND FEDERAL TAXES CURRENT? YES NO

10. LIST COMPLETE NAMES AND ADDRESS OF MAJOR CREDIT REFERENCES, TRADE ACCOUNTS WITHIN THE LAST TWO (2) YEARS.

FIRM

ADDRESS

() PHONE

CREDIT LIMITS

11. PLEASE LIST ANY AND ALL TYPE OF COLLATERAL YOU WOULD CONSIDER OFFERING TO THE LENDER, SHOULD THE NEED ARISE, FOR THE SECURITY OF THE RISK REQUESTED. (THIS CAN INCLUDE NOTES, TRUST DEEDS, LETTERS OF CREDIT, SECOND EQUITY STATUS POSITIONS IN JOINT VENTURES, AND STOCKS.) ADVISE WHAT SECURITY OR COLLATERAL BANKS OR OTHER INSTITUTIONS HAVE TAKEN.

DESCRIPTION	LOCATION	INTEREST %	\$ VALUE
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12. Is the business of applicant wholly or partially financed, directly or indirectly, by any person not named above or on any Schedule hereunder, in any manner other than by (a) a public offering of securities made pursuant to the Securities Act of 1933; (b) credit extended in the ordinary course of business by suppliers, banks and others? YES [] NO [] if yes, state on a Schedule the exact name of each person, business or firm and describe arrangements through which financing is available.

13. Has the applicant, any predecessor of the business enterprise, or the corporation, or its officers, or of the firm or its members filed a petition, voluntary or involuntary, for reorganization or bankruptcy, become or declared insolvent, executed as assignment for the benefit of creditors dissolved a corporation without satisfying 100% of the debts to creditors or otherwise failed in business? YES [] NO []. If YES, give particulars: _____

14. Has any guarantee, surety or similar company or individual ever paid a loss, damages or paid an obligation of the applicant as an individual or, firm, on any of the firm members or the firm or, if a corporation or the officers or directors of the corporation? YES [] NO [] If YES, state name of guarantor. _____

15. There are not suits pending or judgment outstanding against the applicant or any principal, officer or director of the applicant's business enterprise, except as follows (amount and details) _____

16. The applicant, nor principal, officer or director of the Undersigned business enterprise, has not pledged, assigned, hypothecated, mortgaged, or transferred as collateral or otherwise any assets (other than those encumbrances indicated on the applicant's personal or corporate statement of financial condition) except. _____

The Undersigned, and each of them for himself, his heirs, legal representatives, successors and assigns, hereby represents that the statements made herein as an inducement to The Company, ("TC") to execute, or cause to be executed, the payment guarantee undertaking or expression of intent, or for the purpose of providing consulting or other financial services on a best efforts basis, as applied for herein are true, and authorizes and requests any financial institution, individual, firm or corporation to furnish any information requested by "TC" concerning any transaction or services rendered with or for the Undersigned, and, in consideration of the execution by "TC" of said payment guarantee undertaking as well as any expressions of intent issued by "TC", or any renewal, continuation, or modification thereof ("Undertaking"), or for other services rendered, agrees:

I/WE HEREBY DECLARE that the above statements and particulars are true; we have not suppressed or misstated any material facts.

NAME: _____

DATE: _____,2003

SIGNED: _____

AUTHORITY IS HEREBY GRANTED TO ANY INDIVIDUAL, FIRM OR CORPORATION, AND ANY FINANCIAL INSTITUTION TO FURNISH THE COMPANY UPON ITS REQUEST WITH ANY INFORMATION CONCERNING THE ABOVE STATEMENT OR PERTAINING TO THE UNDERSIGNED FINANCIAL STANDING, CREDIT OR MANNER OF MEETING OBLIGATIONS. THIS FORM INCLUDES MY COMPLETE AUTHORIZATION TO OBTAIN SUCH INFORMATION.