

## AIRCRAFT LOAN APPLICATION AND PERSONAL FINANCIAL STATEMENT

200 Civic Center Drive, Suite 110 | Columbus, Ohio 43215-4177 **Toll-Free** 800-357-5773 | **Fax** 614-221-2411 | www.scopeair.com

**Applicant Information** Full Name Social Security Number Birth Date Driver's License # **Home Address** State Years at Residence Zip U.S. Citizen Office Phone Cell Phone E-Mail Address ☐ YES □ NO **Sources of Income List Below Amounts of Any Contingent Liabilities** Salary, Bonuses, Commissions As Co-Maker or Guarantor Dividends, Interest Legal Claims Against You Real Estate Income Amount of Contested Tax Liens \$ Other Other **Total Annual Income Total Contingent Liabilities** Are you a Party in Any Legal Suits or Actions (If Answer is yes, please explain on an attached sheet)?  $\square$  YES  $\square$  NO Are any of your assets held in a trust?  $\square$  YES  $\square$  NO Are you obligated to pay alimony, child support, or separate maintenance payments?  $\square$  YES  $\square$  NO If so, amount \$ **Aircraft Information** Please include specification sheet with your application, if one is available. **Anticipated Ownership Structure Entity Name** ☐ LLC ☐ Corporation ☐ Partnership ☐ Individual ☐ Other: Specify\_ Asking Price (Used) or List Price (new) ■ Business Personal Commerical Other: Specify **FAA Registration** Serial Number Year Model Airframe Hours Engine Hours - SMOH Engine Hours - Since HSI Engine Program (if turbine) Date of Last Annual ☐ YES ☐ NO Anticipated Annual Usage Damage History? Any Modifications / Conversions/ STCs? If yes, provide details below or attach a Separate Sheet ☐ YES ☐ NO Hours/Yr Has an Escrow been established? ☐ YES ☐ NO Has a Purchase Agreement Been Executed? ☐ YES ☐ NO If yes, where?\_ If yes, please provide a copy with your application Who Will Fly This Aircraft? Are you a Pilot? Ratings / Total Hours ☐ YES ☐ NO Hangared? **Base Airport Identifier** Name and Email of Insurance Agent ☐ YES ☐ NO Have You Owned an Aircraft Before? Still Owned? If Yes, When? Year / Make / Model ☐ YES ☐ NO ☐ YES ☐ NO Was it Financed? Under What Name? If So, Where? ☐ YES ☐ NO Do you request permission for shared usage or to sublease the aircraft?  $\square$  YES  $\square$  NO If yes, provide a few details on a separate sheet.

## **Joint Applicant / Guarantor Information**

Applicant's spouse must complete this section if applicant is relying on the spouse's income as a basis of repayment of the credit.

Full Name					Social	Security Number	Birth	n Date	Dr	river's License #
Home Address		Cit	ty	Sta	ate	Zip		Years at Residence		
U.S. Citizen  YES  NO	Cell Phone	I	E-Mail Address	1						
Employer		Address (S	treet, City, State, Zip)					Years There		
	Co.	mplete this	Business App section if self-employ				busine	ess name		
Name of Corporation, P	artnership, Proprie	torship (dba	a), Use Legal Name		1	ype of Business				
		, , , , , , , , , , , , , , , , , , ,	,,,		ı	 □ LLC □ Corpo		Partnership		Other
State and Date of Incorp	ooration / Formation	on			F	ederal ID Number	(EIN)			
Principals				Title	<u> </u>					% Ownership
behalf of the undersing execute a guaranty designation made as are applying for a local information provided in writing, of any charton perform obligation herein, and to determine the executed in the execut	igned, or person in Scope's favor to ownership of an on aircraft what has been carefunge of address, as to Scope. Scomine creditwort dersigned autho	s, partners . Each un property) i ich they pl illy reviewe employme ipe is autho rize all ban	thips, or corporations dersigned understand neciding to grant or an to use for business and is true, correct not, or change in the florized to make all ingother undersigned. Sooking, credit reporting	in w ds the confission s and t and inand juirie ope	whose be that Scop tinue cre d person I comple cial conc es Scope is autho	chalf the undersole is relying on edit. The undersole all purposes. Each of the dition of the undersole answerized to answer	igned the isigned ch un under dersignery to versigners.	may either severa nformation provice applicants represe dersigned represe rsigned agrees to read which may ad- verify the accuracy stions about its cr	ally or ded sent a sent	asing, Inc. (Scope) on or jointly with others, herein (including the and warrant that they and warrants that the y Scope immediately, ely affect their ability the statements made experience with the ces, payment records
Date		_	Signature of Appli	cant	t					
Date			Signature of Joint	App	licant					

## **Personal Financial Statement**

Assets		In Even Dollars	Liabilit	ies		In Even Dollars
Cash on Hand / In Banks / Other (Sch	\$		yable to Banks - Secured	\$		
Listed Securities / Mutual Funds(Sch			yable to Banks - Unsecured			
Accounts and Notes Receivable (Sch			otes Payable			
·	·					
Equity in Closely Held Partnerships /			ite Mortgages Payable (Sch			
Real Estate (Sch. E)			Unpaid T	Taxes / Judgments / Liens		
Other Assets - Itemize			Other De	ebts - Itemize		
			Total Lial	bilities		\$
			Net Wor	th	\$	
		Total Lial		_		
Are any of the above listed a  Complete A  Schedule A – Cash in Banks /	II Schedules an	nd Sign at the End of t		bilities and Net Worth  ttach additional shee	ets as nec	\$ Cessary
Are any of the above listed a	II Schedules an	trust?    YES    NO  ad Sign at the End of to		ttach additional shee	ets as ned	cessary
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Are any of the above listed a  Complete A  Schedule A — Cash in Banks /  Name of Financial Institution	Brokerage Acco	trust?	his Form – A	ttach additional shee	<u> </u>	cessary
Are any of the above listed a  Complete A  Schedule A – Cash in Banks /  Name of Financial Institution  Schedule B – Listed Securities	Brokerage Account Type  Account Type  5 / Mutual Func	trust?	his Form – A	ttach additional shee	Amount	cessary
Are any of the above listed a  Complete A  Schedule A – Cash in Banks /	Brokerage Account Type  Account Type  5 / Mutual Func	trust?	his Form – A	<b>ttach additional shee</b>	Amount	cessary
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Company / Partnership Name				% Owned	Value	Metho	Method of Valuation		
Schedule E – Real Estate Ow	ned (Include Comm	nercial and Resident	ial)						
Description of Property	Date Acquired	Title in Name Of	Marke	et Value	Loan Balance		Monthly Payment		
Life Insurance									
Insurance Company	Type of Policy	Owner of Policy Bene		iciary	Face Amount	If As	If Assigned, To Whom?		
		ided for the nurness		shing or mai	ntaining cradit w	ith Scope	e Leasing, Inc. (Scope) o		
The information contained in the behalf of the undersigned, or pexecute a guaranty in Scope's designation made as to ownershare applying for a loan on aircrainformation provided has been in writing, of any change of add to perform obligations to Scope herein, and to determine crediundersigned. The undersigned and any other information deen	dersons, partnerships favor. Each unders hip of property) in de aft which they plan to carefully reviewed and dress, employment, co. Scope is authorize authorize all banking	or corporations in was signed understands the ciding to grant or control of use for business and and is true, correct and or change in the finance and to make all inquiries undersigned. Scope in the credit reporting ager	hose behinat Scope tinue cred I personal complete cial condit s Scope d is authori	alf the unde is relying of it. The under purposes. It. Each of the under of the under seems necessized to answ	rsigned may eithen the information rsigned applicant ach undersigned ago undersigned ago acresigned which ary to verify the er questions abo	er severa n provid s represer represer rees to n may adv accuracy ut its cr	ed herein (including the ent and warrant that the ents and warrants that the ents of the ents and warrants that the ents and warrants that the ents of the statements madedit experience with the ents and edit experience with the ents and ents and edit experience with the ents and ents and edit experience with the ents and ents and experience with the ents and warrants that the ents and ents an		
behalf of the undersigned, or p execute a guaranty in Scope's designation made as to ownersh are applying for a loan on aircra information provided has been in writing, of any change of add to perform obligations to Scope herein, and to determine cred undersigned. The undersigned	dersons, partnerships favor. Each unders hip of property) in de aft which they plan to carefully reviewed and dress, employment, carefully reviewed and the state of the literature and the st	or corporations in was signed understands the ciding to grant or control of use for business and and is true, correct and or change in the finance and to make all inquiries undersigned. Scope in the credit reporting ager	those behinat Scope tinue cred I personal complete cial condit s Scope d is authori ncies and	alf the unde is relying of it. The under purposes. It. Each of the under seems necessived to answittade refere	rsigned may eithen the information rsigned applicant cach undersigned ago andersigned which cary to verify the er questions about the result of the second second and the second	er severa n provid s represe represer rees to n may add accuracy ut its cru count ba	ed herein (including the ent and warrant that the ents and warrants that the ents and warrants that the ents are warrants and warrants that the ents of the statements madedit experience with the elances, payment record		