

Island Capital Funding

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Loan Proposal Summary

DATE SUBMITTED: _____ LOAN AMOUNT REQUESTED: \$ _____

PRINCIPAL'S NAME(S): _____
COMPANY: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____ FAX: _____ EMAIL: _____

BROKER'S NAME: _____
COMPANY: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____ FAX: _____ EMAIL: _____

PURPOSE OF LOAN: _____

PROPERTY VALUE, TMK #, ADDRESS : _____

PLAN FOR REPAYMENT OF LOAN: _____

LOAN EXIT STRATEGY: _____

FAX COMPLETED FORM TO Hugh Damon @ (808) 951-0185.