



first community mortgage



SELF-EMPLOYED BUSINESS NARRATIVE

Applicant Name: _____

Business Name: _____

Website: _____

Business Type: _____

Description of Business/Business Profile:

What percentage do you own? _____

If less than 100%, who owns the remaining portion and what percentage?

Where do you conduct business: Office, Factory, Residence? _____

Do you have more than one physical location? (Check One) ☐ Yes ☐ No

If yes, how many? _____

Current rent for business space(s)? _____

Address (s): _____

How many people do you employ? ☐ Full-Time
☐ Part-Time
☐ Contractors

of Full-Time Employees: _____
of Part-Time Employees: _____
of Employed Contractors: _____

Do you manufacture products? (Check One) ☐ Yes ☐ No

If so, do you have a Cost of Goods Sold for the product you sell? ☐ Yes ☐ No

If **YES**, describe in detail:

Estimate for monthly Cost of Goods Sold (Manufacturer): _____

Do you buy or resell a product? (Check One) ☐ Yes ☐ No

If **YES**, describe in detail:

Estimate for monthly Cost of Goods Sold (Retail): _____

Please provide any additional business expenses not listed: (Excluding Rent / Payroll / COG Sold)

How has the Covid-19 Pandemic impacted your business?

Is there anything else you can tell us about your business that is important for us to know as we review your bank statements, including sources of deposits, wires, and withdrawals?

I certify that the statements and information contained in this submittal are true, accurate, and complete.

Borrower 1 Name: _____

Borrower 1 Signature: _____

I certify that the statements and information contained in this submittal are true, accurate, and complete.

Borrower 2 Name: _____

Borrower 2 Signature: _____

For FCM Internal Use Only

Underwriter Name: _____

Date of Review: _____

Underwriter Signature: _____