



# NATIONAL CAPITAL FUNDING, LTD.

## Builder/Retailer Approval Checklist

Builder/Retailer must be approved by National Capital Funding, Ltd. prior to loan closing.

Builder/Retailer: \_\_\_\_\_

\_\_\_\_\_ **Builder/Retailer Summary Application**

\_\_\_\_\_ **Contractor's Performance Agreement**

\_\_\_\_\_ **Disbursement Instructions**

\_\_\_\_\_ **Copy of Builder's/Retailer's State License**

\_\_\_\_\_ **Evidence of General Liability Insurance**

\_\_\_\_\_ **Evidence of Worker's Compensation Insurance** or a brief statement on company letterhead signed by the Builder/Retailer explaining why they may not be required to carry it.

\_\_\_\_\_ Mfg/Modular Home Retailers: **Certificate of Dealer's Open Lot Insurance Policy** naming NCF as a Loss Payee. See clause below. Otherwise, a Builder's Risk insurance policy will be required on each deal.

**Loss Payee Clause** on Dealer's Open Lot Insurance Policy must read as follows:

National Capital Funding, Ltd.  
Its Successors and/or Assigns  
14405 Walters Rd., Ste 350  
Houston, TX 77014

\_\_\_\_\_ Site-Built Home Builders: **Evidence of Builder's Risk Insurance** required on each deal.

\_\_\_\_\_ Site-Built Home Builders: **Most Recent Two Years of Tax Returns**

\_\_\_\_\_ Site-Built Home Builders: **Year-to-Date Profit & Loss Statement**

\_\_\_\_\_ Site-Built Home Builders: **Executive Summary Detailing Experience**

***Please complete and submit all items listed above for NCF approval of Builder/Retailer via e-mail to [tmcknight@ncfunding.net](mailto:tmcknight@ncfunding.net), via fax to 281.537.5698, or via mail delivery to***

**National Capital Funding, Ltd.  
14405 Walters Road, Suite 350  
Houston, TX 77014-1320  
Phone: 281.537.0073**



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## Builder/Retailer Summary Application

PLEASE TYPE OR PRINT CLEARLY. Separate form to be completed for each location to be approved.

### GENERAL BUSINESS INFORMATION

Company Name: \_\_\_\_\_ Date Established: \_\_\_\_\_

Contact Person(s) & Title(s): \_\_\_\_\_

Primary Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Type of Entity:     Sole Proprietorship     LLC     General Partnership     Limited Partnership  
 Corporation     Publicly Traded Corporation     Other: \_\_\_\_\_

Federal Tax ID #: \_\_\_\_\_ State Builder/Retailer License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

### Principal Officers/Owners (Note: SS# of Officers/Owners not required on Publicly Traded Corporations)

Name: \_\_\_\_\_ Title: \_\_\_\_\_ SS #: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ SS #: \_\_\_\_\_

### CONSTRUCTION/SALES HISTORY

Primary Type of Construction:     Site-Built     Modular     Manufactured

Number of Homes Completed in the Past 5 Years: \_\_\_\_\_ Number of Homes Completed in the Past 12 Months: \_\_\_\_\_

Number of Homes Currently in Process: \_\_\_\_\_ Number of Homes Completed But Not Yet Sold: \_\_\_\_\_

### GENERAL LIABILITY INSURANCE COVERAGE (Note: Provide evidence of policy reflecting coverage limits)

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### BUILDER'S RISK/OPEN LOT INSURANCE COVERAGE (Note: See NCF Approval Checklist for evidence requirements)

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Are you currently involved in any litigation?**     Yes     No    If Yes, please attach explanation.

**Are you affiliated with a Home Buyers Warranty?**     Yes     No    If Yes, which company? \_\_\_\_\_





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## CONTRACTOR'S PERFORMANCE AGREEMENT

Re: Construction of Improvements

Lender: AS NAMED IN CREDIT AGREEMENTS

Builder/Retailer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Federal Tax I.D #: \_\_\_\_\_

Gentlemen:

I/We, the undersigned General Contractor(s), hereby agree that in the event of default by applicant(s) under loan documents executed to finance construction of improvements we shall, at your option and direction, continue performance under our agreement with such applicant(s), provided that we are compensated for all work after said direction by you, your successors and/or assigns or purchaser in accordance with the agreement with the applicant(s).

Very truly yours,

\_\_\_\_\_  
Company Name

By: \_\_\_\_\_  
Authorized Signature

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_



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## DISBURSEMENT INSTRUCTIONS

All draws will be disbursed through the title company per direction of NCF. These instructions let us know how you want to receive your funds. Please select your preferred method of payment and complete the related section. In most cases, the manufacturer's invoice/payoff will be made payable to the manufacturer or floorplan financing source directly.

**Builder/Retailer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

### WIRE TRANSFER

Bank Name \_\_\_\_\_

Bank Location \_\_\_\_\_

ABA Number \_\_\_\_\_

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

Further Credit Account Name (*if applicable*) \_\_\_\_\_

Further Credit Account Number (*if applicable*) \_\_\_\_\_

### CHECK

If different from above, please complete the section below:

Recipient Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Recipient Phone Number \_\_\_\_\_

\_\_\_\_\_  
**Builder/Retailer's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name and Title**