

SELF-EMPLOYED BUSINESS NARRATIVE FORM

Borrower Name: _____ **Date:** _____ **Business Name:** _____ **Website:** _____

Business Address: _____ **Bus. Start Date:** _____ **Legal Structure (Partnership, Corp., LLC):** _____

Business Ownership (%): _____ **If less than 100%, who owns the remaining portion, and what percent?** _____

Does the business have a physical location? _____ **If more than 1 location, please specify.** _____ **Business Description:** _____

Yes
No

Does Business Provide Sales of Goods, Services, or Both? _____ **Location Type:** _____

Commercial
Residential

Number of Employees: _____ **Any special considerations you would like to communicate to STG Mortgage, Inc. regarding your bank statements, including source of deposits, wires, or withdrawals?** _____

Full Time

Part Time

Contractors

I/We hereby certify that the information provided in this form is true, accurate and complete. I/We understand that any misrepresentation made in this document may result in the loan application being declined.

Title: _____ **Name:** _____ **Date:** _____ **Signature:** _____

