

## South Carolina Department of Labor, Licensing and Regulation South Carolina Manufactured Housing Board

110 Centerview Dr. • Columbia • SC • 29210 P.O. Box 11329 • Columbia • SC 29211-1329

### OWNER PREPARED FINANCIAL STATEMENT

Licensee Name:			
Financial statement of			
Name			State Organized
Doing Business As "D.B.A.":		License No.:	
Street Address	City	State Zip	Phone No.
Business Entity: ☐ Sole Proprietorship	$\Box$ Do	omestic or Foreign Corporation   □ Pa	rtnership
☐ Limited Liability Parti	nership 🗆 Li	mited Liability Company	-
Balance Sheet	NOTE: Field	s with "schedule numbers" (ie. schedule 1) in	the descriptions
Data !! As af!:		omatically populated from pages 2-4 back to	
Month/Day/Year	pages 2-4 first	if you have numerical data to input into the	"schedule" fields.
CURRENT ASSETS	Dollars	CURRENT LIABILITIES	Dollars
Cash – on hand		Accounts payable (schedule 3)	
Cash – in banks (schedule 1)		Taxes payable	
Securities – stocks/bonds (schedule 2)		Current notes payable (schedule 4)	
Accounts receivable (schedule 3)		Other current liabilities (schedule 5)	
Current notes receivable (schedule 4)			
Inventory			
Other current assets (schedule 5)			
Total Current Assets		Total Current Liabilities	
FIXED & OTHER ASSETS	Dollars	LONG-TERM LIABILITIES	Dollars
Real estate (schedule 6)		Real estate debt (schedule 6)	
Vehicles and equipment (schedule 7)		Long-term notes payable (schedule 9)	
Long-term notes receivable (schedule 9)		Other long-term debt (schedule 8)	
Retirement Accounts (e.g. IRAs, 401k)			
(Generally only for personal financial statements)			
,			
Other assets and investments (schedule 8)			
<b>Total Fixed &amp; Other Assets</b>		Total Long-Term Liabilities	
TOTAL ASSETS		TOTAL LIABILITIES	
Total Current Assets + Total Fixed & Other Assets		Total Current Liabilities + Total Long-Term	
		Liabilities	
		NET WORTH/EQUITY *	
		TOTAL LIABILITIES & NET WORTH/EQUITY	

<sup>\*</sup> Total Assets minus Total Liabilities equals Net Worth/Equity

### SUPPLEMENTARY SCHEDULES

(Note: If space is insufficient, attach separate sheet with additional information)

### Schedule 1 Bank Accounts

Name and Address of Bank(s)	Current Balance
Enter additional sheet total (if applicable)	
TOTAL	

## Securities – Stocks and Bonds

Name of Security	Value
Enter additional sheet total (if applicable)	
TOTAL	

# Schedule 3 Accounts Receivable / Accounts Payable

Accounts Receivable	Amount	Accounts Payable	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

#### Schedule 4

### Current Notes Receivable / Current Notes Payable

(Portion of notes receivable/notes payable due within the next 12 months)

Notes Receivable	Amount	Notes Payable	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

### <u>Schedule 5</u> Other Current Assets/Other Current Liabilities

Other Current Assets (Itemize)	Value	Other Current Liabilities (Itemize)	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

### Schedule 6

Real Estate

For individuals, report at estimated current value.

For businesses, report at cost.

Location/Description	Amount	Mortgage or Lien Holder	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

#### Schedule 7

### Vehicles and Equipment

For individuals, report at estimated current value.

For businesses, report at cost less accumulated depreciation (book value).

Description	Value
Enter additional sheet total (if applicable)	
TOTAL	

# Schedule 8 Other Assets and Investments/Other Long-Term Debt

Other Assets and Investments (Itemize)	Amount	Other Long-Term Debt (Itemize)	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

### Schedule 9

Long Term Notes Receivable / Notes Payable

Include automobiles, trucks and equipment, and other notes payable.

Long Term Notes Receivable	Amount	Long Term Notes Payable	Amount
Enter additional sheet total (if applicable)		Enter additional sheet total (if applicable)	
TOTAL		TOTAL	

If you have listed a note payable to a stockholder, is the payable to all other creditors?	hat stockholder willing to subordinate the note
	ation agreement stating that all subcontractors, suppliers
and other creditors would be compens  ☐ No	sated prior to the stockholders receiving funds.
AFFIDAVIT OF ACCURACY (This section must be signed	d and notarized)
accordance with South Carolina Code of Laws, So	the purpose of establishing financial responsibility, in ection 40-29-200(B)(1) and South Carolina Code of submitted the foregoing information provided on all the
I hereby certify, under penalty of perjury that the informat statement of our financial condition on the date indicated	
Authorized Company Representative – Print Name	Date
Authorized Company Representative – Signature	<u>-</u>
Sworn and subscribed before me this day of	, 20
Notary Signature:	<del>-</del>
Print Notary Name:	_ (SEAL)
Notary Public for the State of:	<del>-</del>
Commission Expiration Date:	<del>-</del>