

Business Finance Company Profile

BUSINESS INFORMATION

Legal Name of Your Business _____

Current Business Address _____

City _____ County _____ St _____ Zip _____

Entity Type Corporation LLC Partnership Sole Proprietorship

Years in Business _____ Number of Employees _____ Tax Identification Number _____ -

Business Phone () _____ Business Fax () _____ Cell () _____

E-Mail Address _____ Company Web Site _____

Briefly, what does your company do? _____

BUSINESS ACCOUNTS & LOAN INFORMATION

Dollar Volume of Accounts Now Open? \$ _____ (Please attach a Current Aging Report)

Average Monthly Sales \$ _____ Previous Year's Annual Sales \$ _____

Average Profit Margin _____ % Bad Debt Write-off last Year \$ _____

Average Invoice Size \$ _____ Number of Active Customers _____

What are your normal terms of payment granted to your customers? _____

Do you have any existing loans outstanding? Yes No If so, please complete the following.

Name of Bank or lender _____ Loan Amount \$ _____

Name of Loan Officer _____ Telephone () _____

Name of Bank or lender _____ Loan Amount \$ _____

Name of Loan Officer _____ Telephone () _____

Name of Bank or lender _____ Loan Amount \$ _____

Name of Loan Officer _____ Telephone () _____

Name of your accounts receivable manager _____

Phone or extension () _____ E-Mail _____

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PRINCIPALS INFORMATION

President / Owner First Name _____ Middle Init. ____ Last Name _____

Home Address _____

City _____ **County** _____ **State** ____ **Zip** _____

Date of Birth _____ **Home Telephone** () _____ **Cell** () _____

Personal E-Mail _____

Vice-Pres. / Co-Owner First Name _____ Middle Init. ____ Last Name _____

Home Address _____

City _____ **County** _____ **State** ____ **Zip** _____

Date of Birth _____ **Home Telephone** () _____ **Cell** () _____

Personal E-Mail _____

Secretary / Treas. First Name _____ Middle Init. ____ Last Name _____

Home Address _____

City _____ **County** _____ **State** ____ **Zip** _____

Date of Birth _____ **Home Telephone** () _____ **Cell** () _____

Personal E-Mail _____

Do any of your principals have any personal tax liens or judgments outstanding. Yes No

If so, please explain the circumstances, payment plans, etc. _____

Have any of your principals ever been arrested for a felony? Yes No

If yes, please explain _____

Have any of your principals ever filed for bankruptcy? Yes No

If yes, please provide dates of filings _____

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ADDITIONAL INFORMATION

Does your business have any pending litigation? Yes No **If yes, please explain.** _____

Does your business have any tax liens or back taxes owed? Yes No **If yes, please explain.**

BANKING INFORMATION

Name of your bank. (Business Checking Account) _____

Address _____

City _____ **State** _____ **Zip** _____

Bank Contact _____ **Phone ()** _____

TRADE INFORMATION

Please provide the names of your three largest customers

Customer Name _____ **Monthly Sales Volume \$** _____

Customer Name _____ **Monthly Sales Volume \$** _____

Customer Name _____ **Monthly Sales Volume \$** _____

The statements made herein are true and correct and I understand that Factor, Lender, its Agents or its Assigns will rely upon them when processing this application. By signing below, I hereby authorize Factor, Lender, its Agents, or its Assigns to use any business or consumer reporting company or credit bureau to verify the information contained herein and to provide them with any additional information regarding our business and/or its principals.

We fully understand that by submitting this application, Factor, Lender, or its Assigns are under no obligation to provide financing or to provide any services whatsoever. It is further understood that Factor, Lender, or their Assigns will provide financing only after the execution of a Master Purchase and Sales Agreement or similar document is executed.

With the following signature, applicant hereby authorizes its suppliers, customers, accountants, and attorneys to provide any necessary supporting documents as required to facilitate this business financing application.

A facsimile copy of this authorization and document may be accepted as an original.

Signature _____ **Print Name** _____ **Date** _____

BROKER if applicable _____