

Please Type or Print Clearly



Application for Credit

Company Information:

Business Name:	D/B/A name (if applicable):
Street Address:	Floor/ Suite:
City:	State:
Zip Code:	Telephone:
Fax:	Cell Telephone:
Date Started:	State of Organization:
Federal Tax ID #:	Date Organized:

Banking Relationship:

Bank Name:
Street Address:
City, State, Zip Code:
Telephone:
Contact Name:
Account #:

Does the Bank have security interest in the accounts receivables and/or inventory of the Company? Yes No

Does any other party have a security interest in the accounts receivable and/or inventory of the Company? Yes No

Secured Party Information (if "Yes" to either of previous two questions):

Name:
Street Address:
City, State, Zip Code:
Purpose / Security Held:

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Company Officers:

President	
Name:	Work Telephone:
Street Address:	Home Telephone:
City, State, Zip Code:	Social Security #:
% Ownership in Company:	D.L. State and #:
Vice President	
Name:	Work Telephone:
Street Address:	Home Telephone:
City, State, Zip Code:	Social Security #:
% Ownership in Company:	D.L. State and #:
Treasurer / Finance Director	
Name:	Work Telephone:
Street Address:	Home Telephone:
City, State, Zip Code:	Social Security #:
% Ownership in Company:	D.L. State and #:

Briefly Describe The Company's Product or Service:

Sales / Financial Information:

Normal Selling Terms:	Dating Terms (if offered):
Average Invoice Size (\$):	Est. # Invoices per Month:
Sales Generated By: Purchase Order Contract	Invoicing Method: At Completion Other
Approx. Monthly Sales (\$ - Last 12 Months):	Approx. Total Assets (\$ - Latest Period)
Return Policy:	

Is the Company current on its 940 and 941 taxes?

Yes

No

Does the Company or any of its Officers have any pending or threatened litigation against it / them?

Yes

No

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Accountant Relationship:

Accountant Name:
Street Address:
City, State, Zip Code:
Telephone:
Contact Name:

The following documents are required. These documents will permit Fundamental Financial to determine its ability to enter into a financing relationship with the Company.

1. Completed application (pages 1-3)
2. Current Company financial statements – Income statement and balance sheet
3. Personal financial statement(s) of the Company’s owner(s)
4. Certificate of Incorporation / Formation
5. Articles of Incorporation
6. D/B/A filing (if applicable)
7. List of top customers including name, address and telephone number for each
8. Current accounts receivable aging report
9. Current accounts payable aging (including names and addresses)
10. Blank invoice copy
11. Five trade references including name, address and telephone number for each

The information above (including this application) will remain strictly confidential and will be retained only by Fundamental Financial.

The information contained in this application is true and correct and I hereby authorize Fundamental Financial to conduct any necessary credit investigation. We agree to reimburse Fundamental Financial for all costs and expenses incurred during the application process and we further authorize Fundamental Financial to file appropriate U.C.C. financing statements to secure the indebtedness.

Signature of Authorized Person

Name of Authorized Person (Print / Type)

Title of Authorize Person (Print / Type)

Date