

## ABL & Factoring Application

| Referred by:   |   |                                       |  |
|--|---|---------------------------------------|--|
| Mercired by.   | Current Amou  | nt of Open A/R:                       |  |
| GENERAL BUSINESS INFORMATION  Legal Name(s) of Business:  Trade Name(s) of Business:  Business Description:  |   |                                       |  |
| Business Description: Intended Use of Proceeds:  |   |                                       |  |
| Primary Business Address:  |   |                                       |  |
| Alt Mailing Address:   |   |                                       |  |
| Business Phone Number:   |   |                                       |  |
| Federal Tax ID#:   | Legal Form  | of Business:                          |  |
| State of Organization:   |   |                                       |  |
| Website:   |   |                                       |  |
| Primary Business Contact:  |   |                                       |  |
| Telephone #:   | Cell #:   | Fax #                                 | •  |
| Email Address:   |   |                                       |  |
| Carandam Pusinasa Cantasta   |   | T:+1                                  |  |
| Secondary Business Contact:<br>Telephone #:  | Coll #•   | 11116:                                |  |
|  |   |                                       |  |
| Email Address:   |   |                                       |  |
| LENDING RELATIONSHIP   |   |                                       |  |
| Name:Length o  | f Relationship:   | Line Lim                              | it:                                      |
| Lender Address:  |   |                                       |  |
|  |   |                                       | F :                                      |
|  |   | lender Tel #:                         |  |
| Lender Contact:  |   | Lender Tel #: _                       |  |
| Lender Contact:  |   | Lender Tel #: _                       |  |
| <pre>Lender Contact: OWNER/OFFICER/PARTNER INFORMATION</pre>   |   | Lender Tel #: _                       |  |
| <pre>Lender Contact: OWNER/OFFICER/PARTNER INFORMATION Name:</pre>   | Email Address:  |                                       |  |
| <pre>Lender Contact: OWNER/OFFICER/PARTNER INFORMATION Name: Street Address:</pre>   | Email Address:<br>City:   | State:                                | Zip:                                     |
| <pre>DWNER/OFFICER/PARTNER INFORMATION Name: Street Address: Social Security # Driver</pre>  | _Email Address:<br>_City:<br>''s License #:   | State: Own                            | Zip:<br>ership %:                        |
| <pre>Lender Contact: OWNER/OFFICER/PARTNER INFORMATION Name: Street Address:</pre>   | Email Address:<br>City:<br>'s License #:<br>Home Tel #:   | State: Own                            | Zip:<br>ership %:<br>Tel #:              |
| OWNER/OFFICER/PARTNER INFORMATION  Name: Street Address: Social Security # Driver  Position: DOB: Prior Addresses Within Last 10 Year  | _Email Address:<br>_ City:<br>''s License #:<br>_ Home Tel #:                                   | State: Own<br>Cell                    | Zip:<br>ership %:<br>Tel #:              |
| OWNER/OFFICER/PARTNER INFORMATION  Name: Street Address: Social Security # Driver  Position: DOB: Prior Addresses Within Last 10 Year  | _Email Address:<br>_ City:<br>''s License #:<br>_ Home Tel #:                                   | State: Own<br>Cell                    | Zip:<br>ership %:<br>Tel #:              |
| OWNER/OFFICER/PARTNER INFORMATION Name: Street Address: Social Security # Driver Position: DOB: Prior Addresses Within Last 10 Year Name: Address: City:   | _Email Address:<br>_ City:<br>''s License #:<br>_ Home Tel #:<br>'s:<br>Email Address: _<br>Sta | State:<br>Own<br>Cell<br>te: Zip:     | Zip:<br>ership %:<br>Tel #:              |
| <pre>Description:</pre> <pre>D</pre> | _Email Address: _ City: _ City: _ Home Tel #:_ s: _ Email Address: _ Sta                        | State: Own<br>Cell<br>te: Zip:<br>Own | Zip:<br>ership %:<br>Tel #:<br>ership %: |

## COMPANY LEGAL AND OPERATING CONDITION

If Yes, With Whom?: Does the Company Currently Have any Secured Creditors? If Yes, Explain: Are any UCC's on File with A/R as Collateral? If Yes, Explain: Are there any delinquent Federal, State or Payroll taxes? If Yes, Explain: Has the Company/Principals ever filed Bankruptcy? Has any Owner/Officer ever been arrested or convicted If Yes, Explain: of any felony or misdemeanor? Are there any Judgments/Liens against the Company or If Yes, Explain: any Owner/Officer? If Yes, Explain: Has the Company ever operated under a different name? Is the company now or within the last year involved in any If Yes, Explain:

## AUTHORIZATION TO OBTAIN INFORMATION

Lawsuits?

We authorize Lender and it's assigns to obtain whatever information regarding employment, bank accounts, and/or outstanding credit (mortgage, auto, personal, home improvement, charge cards, credit unions, etc.) that the Lender deems to be necessary in connection with this application or in the course of review or collection, of any credit extended in reliance on this application. We authorize and instruct any consumer credit agency, commercial credit reporting agency, business or person to compile and furnish to the Lender any such information regarding us or our business(es) as may be requested by Lender and agree that such information, along with this application, shall remain Lender's property whether or not the application is approved.

This authorization will be valid for a period of two years from the date below or as long as the applicant has an outstanding balance with the Lender. A photocopy of this authorization will be valid as the original. We authorize the Lender to verify or check any of the information given, including credit references and employment and to obtain credit bureau reports as the Lender deems necessary.

We hereby authorize the Lender to record UCC1 financing statements in any jurisdiction which it deems appropriate.

The statements made in and documents attached to this application are true and accurate. We sign this application under penalty of perjury. We acknowledge that the Lender will rely on this information to provide money to us. Each of the undersigned has read this application and the documents attached to it and are authorized to sign in their respective positions set forth below.

If you have forwarded this application to us electronically, this will act as your signature and authorization to proceed with our analysis. If you wish to add your electronic signature, please proceed to the non-required signature fields below.

| Principal | name:      | Date:  |
|-----------|------------|--------|
| Principal | Signature: | Title: |
| Principal | Name:      | Date:  |
| Principal | Signature: | Title: |