



- 1) Fill out your application online by clicking on the blank spaces by each section/question
- 2) Save a copy on your computer for your records.
- 3) If you do not have a mail account directly linked please email us at info@expocredit.com and attach your filled out application.
- 4) Click on the envelope on the PDF menu to directly send to us.

Client Business Information:

Legal Name of Business:	Date:			
Trade Names (DBA):	State of Incorporation: Fed. Tax I.D.:			
Address:				
City: State:	Zip Code:			
Website:	Fax:			
Contact Person:	Phone:			
Nature of Business Conducted:				
Facility Amount being requested:				
Annual Sales (USD \$):				
Average monthly # of invoices:				
Average size of invoice:	Payment terms:			
Does the company have any subsidiaries or affiliates?	If yes, please provide names:			
Has the company ever filed for bankruptcy?	yes, please explain:			
Is the company involved in any lawsuit or pending litigation	on? If yes, please explain:			
Does the company have any federal or state taxes past due? If yes, please explain:				
Referred to Expocredit by:				

Management/Ownership Structure:

Management Own		%		Place and		Active Mgt?	PEP?
Title	Shareholder Name	Part	Nationality	Date of Birth	Tax ID#	(Y/N)	(Y/N)
	-						
	1						

Do the owners/managers of explain:	wn or are a partner/officer in any	other business or ventu	re? If yes, please
	, or any business entity in which lease explain.	they have been associate	ed, filed for bankrupcty in the
Do the owners/managers ha	ave any legal claims, suits or judç	gements pending?	If yes, please explain:
Have the owners/managers	ever been convicted of a felony	? If yes, please ex	plain:
Current Financing Arrangem	ent:		
Does the company have an	existing line of credit or factoring	g arrangement? If	yes, please indicate below.
Name of Lender:			
Line Facility amount:	Outstanding Balance	Pricing	
Advance Rate: Ma	aturity Date:	Collateral Description	1:
Name of Lender:			
Line Facility amount:	Outstanding Balance.	Pricing	
If there are additional loans or credit fa	cilities, please provide details in a separate s	heet.	
Note: The information contained in this Strad	e Request Form is provided for the purpose	of obtaining a supply chain credit	facility with Strade.
request. I, the legal undersigned, authorized and my criminal background informatic Group or its agent(s) to release all reco	r of the information and understands that Str rize Expocredit Financial Group and its respe on. This is my legal affidavit and I hereby auth rds of my information. I also release Expocred s about me, from any and all liabilities arising	ective agent(s) to solicit information norize any credit reporting agency dit Financial Group and its respecti	n about my consumer credit history contacted by Expocredit Financial ive employees and agents, and the
Date	Signature	Name	Title
S.S #	Date of Birth	Current Address	

FINANCIAL INFORMATION REQUIRED

Financial Statements:

- 1. Two (2) years of audited/reviewed/compiled financial statements (Income Statement, Balance Sheet and Cash Flow Statement) with financial footnotes.
- 2. Most recent interim financial statements and prior year comparable.
- 3. Financial projections, if available

Other

- 1. Current Accounts Receivable and Accounts Payable Aging Reports.
- 2. Accounts Receivable and Aging Report as of most recent year end.
- 3. Copy of transaction documents used (i.e. purchase orders, invoices, proof of delivery, etc.)
- 4. Copy of contracts, vendor management agreements, etc., if applicable.
- 5. Inventory Report by product class and location, if applicable.
- 6.If unlimited personal guaranty is required, Personal Financial Statements and one year tax returns for guarantors.
- 7. Corporate Organization Chart, if applicable.
- 8. Articles of incorporation and Company TIN#.
- 9. Copies of Driver License or applicable ID for all company officers.

Additional information that is not listed above may be required.