

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. 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:

Date of incorporation:

City:

State:

Zip Code:

Website:

Fax:

Contact Person:

Phone:

Nature of Business Conducted:

Factoring Facility Amount being requested:

Number of Employees:

Average monthly # of invoices:

Average size of invoice:

Does the company have any subsidiaries or affiliates? If yes, please provide names:

Has the company ever filed for bankruptcy? If yes, please explain:

Is the company involved in any lawsuit or pending litigation? If yes, please explain:

Does the company have any federal or state taxes past due? If yes, please explain:

Referred to Expocredit by:

Clients (debtors) Information:

Client Name	Location (Country-City)	Terms	Sales Volume Per Month	Credit Limit Requested	Delivery Terms	Client Since (year)

Can we contact your clients directly?

Do the owners/managers own or are a partner/officer in any other business or venture? If yes, please explain:

Have the owners/managers, or any business entity in which they have been associated, filed for bankruptcy in the last 10 years? If yes, please explain.

Do the owners/managers have any legal claims, suits or judgements pending? If yes, please explain:

Have the owners/managers ever been convicted of a felony? If yes, please explain:

Current Financing Arrangement:

Does the company have an existing line of credit or factoring arrangement? If yes, please indicate below.

Name of Lender/Factor:

Line or Factoring Facility amount: Outstanding balance Pricing

Advance Rate: Maturity Date: Collateral Description

Name of Lender/Factor:

Line or Factoring Facility amount: Outstanding balance Pricing

If there are additional loans or credit facilities, please provide details in a separate sheet.

Note:

The information contained in this Factoring Request Form is provided for the purpose of obtaining an accounts receivable factoring facility with Expocredit.

The undersigned certifies the accuracy of the information and understands that Expocredit is relying on the information provided herein in evaluating the request. I, the legal undersigned, authorize Expocredit Financial Group and its respective agent(s) to solicit information about my consumer credit history and my criminal background information. This is my legal affidavit and I hereby authorize any credit reporting agency contacted by Expocredit Financial Group or its agent(s) to release all records of my information. I also release Expocredit Financial Group and its respective employees and agents, and the entities providing information or reports about me, from any and all liabilities arising out of the release of any such information.

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. Sample of transaction documents used (i.e. purchase orders, invoices, proof of delivery, etc.)
3. Copy of contracts, vendor management agreements, etc., if applicable.
4. If unlimited personal guaranty is required, Personal Financial Statements and a year tax returns for guarantors.
5. Corporate Organization Chart, if applicable.
6. Articles of incorporation and Company TIN#.
7. Copies of Driver License or applicable ID for all company officers.

Additional information that is not listed above may be required.