

BUSINESS FINANCING APPLICATION

Referring Broker/Affiliate (if applicable) Business Name _____ Contact Person: _____

Email: _____ Phone: _____ Fax: _____

TELL US ABOUT YOUR REQUEST

Ref Code: bkr

Amount Requested \$ _____ Minimum Amount Needed \$ _____

Describe the Type of Loan Reason for your Loan Request (Be specific)

Use of Funds (1) _____ \$ _____
(2) _____ \$ _____
(3) _____ \$ _____
(4) _____ \$ _____

GENERAL BUSINESS INFORMATION

Legal Business Name _____ DBA _____

State Tax ID Number _____ Federal Tax ID Number _____

Tel _____ Fax _____ Alternate Contact # _____

Street _____ City _____ State _____ Zip _____

Any Open or Old Tax Lien(s)? Amount(s)? _____ (provide proof of payment if paid)

Total Assets \$ _____ Total Liabilities \$ _____ Net Worth \$ _____

Nature of Business / Company Type _____ Website _____

Business Inception Date MM/DD/YYYY ____/____/____ No. of Employees _____ Dunn & Bradstreet # _____

Revenues Gross: 2015 \$ _____ 2016 \$ _____ Year to Date-2017 \$ _____ (thru _____/month)

Net: 2015 \$ _____ 2016 \$ _____ Year to Date-2017 \$ _____ (thru _____/month)

**Provide taxes and financials if available via fax.*

Sole Proprietorship _____, Partnership _____, C-Corp _____, Sub-S Corp _____, LLC Corp _____, Other _____

APPLICANT INFORMATION

First Name _____ Last Name _____ Company Title _____

Home & Cell Phone _____ Email Address _____

Home Address _____ City _____ State _____ Zip _____

Social Security Number _____ - _____ - _____ Date of Birth _____ - _____ - _____ % Ownership _____

Total Household Income (yearly) \$ _____ Total Assets \$ _____ Total Liabilities \$ _____

Married _____ Single _____ Separated _____ Divorced _____

CO-APPLICANT INFORMATION

First Name _____ Last Name _____ Company Title _____

Home & Cell Phone _____ Email Address _____

Home Address _____ City _____ State _____ Zip _____

Social Security Number _____ - _____ - _____ Date of Birth _____ - _____ - _____ % Ownership _____

Total Household Income (yearly) \$ _____ Total Assets \$ _____ Total Liabilities \$ _____

Married _____ Single _____ Separated _____ Divorced _____

BANKING AND ACCOUNT INFORMATION

#1 Bank/Institution _____ Account # _____

Type of Account: ___ *Checking* ___ *Savings* ___ *Other* **Average Monthly Deposits** \$ _____

Contact Name _____ Phone #: _____ Fax #: _____

Date Opened: _____ NSF's _____ Current Balance: _____ Signer: _____

#2 Bank/Institution _____ Account # _____

Type of Account: ___ *Checking* ___ *Savings* ___ *Other* **Average Monthly Deposits** \$ _____

Contact Name _____ Phone #: _____ Fax #: _____

Date Opened: _____ NSF's _____ Current Balance: _____ Signer: _____

ASSET & ADDITIONAL INFORMATION (PLEASE FILL OUT COMPLETETLY)

Real Estate Owned

Value of Residential Real Estate Owned \$ _____ Mortgage Balance(s) \$ _____

Description of Residential Real Estate & Address: _____

1) Value of Commercial Real Estate Owned \$ _____ Mortgage Balance \$ _____ Orig. Purchase Price: _____

Description of Commercial Real Estate & Address: _____

2) Value of Commercial Real Estate Owned \$ _____ Mortgage Balance \$ _____ Orig. Purchase Price: _____

Description of Commercial Real Estate & Address: _____

Mortgage/Land Lord Information (If you don't own your commercial property/business location please fill out Landlord info).

1) Mortgage/Landlord Holder Name _____ Phone # _____ Fax # _____

How many years remain on Lease? _____ How many years remain on Note? _____ Mortgage Balance _____

2) Mortgage/Landlord Holder Name _____ Phone # _____ Fax # _____

How many years remain on Lease? _____ How many years remain on Note? _____ Mortgage Balance _____

Business Equipment Owned (Free and Clear)

Office Equipment & Furnishings \$ _____ (Computers, Telephones, POS Systems, Copiers, Furniture, etc)

Industrial and Manufacturing Equipment \$ _____

Construction and Farm Equipment \$ _____ (Yellow Iron-Tractors, Loaders, Dozers, Generators,..Etc)

Medical and Dental Equipment \$ _____ Other \$ _____ Describe _____

Equipment Purchases

Do you plan to purchase equipment? *Yes or No* If yes, type: _____

Vendor Name: _____ Vendor Phone #: _____ Contact: _____

Receivables & Purchase Orders

Total receivables \$ _____ Avg. Inv. Size \$ _____ # of Accts. _____ Mo. Sales Vol. _____

Total Receivables Current \$ _____ 30-60 DAYS _____ 60-90 DAYS _____ Over 90 _____

Purchase Orders \$ _____ Avg. PO Size \$ _____ # of Accts _____

Have you received PO financing previously or now? Yes or No if yes, who: _____

Merchant Account

Average Monthly Credit Card Volume (Visa/MasterCard): \$ _____ How Many Merchant/Credit Card Accounts? _____

Merchant/Credit Card Processing Info: Processor: _____ Contact #: _____ Terminal Type: _____

How Processed: % Card Swiped: _____ % Manually Keyed: _____ % Phone/Mail Order: _____ % Internet: _____

Do you have any existing 'cash advances' and/or 'bank statement loans'? Yes / No Balance(s) & with whom: _____

TRADE REFERENCE(S) (The longer the trade reference has been open the better and will be verified).

<u>1.</u> Company Name	Account #	Phone Number	Fax Number		
Open Date	Signer(s)	Satisfactory?	High Credit	Current Balance	Contact Name

<u>2.</u> Company Name	Account #	Phone Number	Fax Number		
Open Date	Signer(s)	Satisfactory?	High Credit	Current Balance	Contact Name

<u>3.</u> Company Name	Account #	Phone Number	Fax Number		
Open Date	Signer(s)	Satisfactory?	High Credit	Current Balance	Contact Name

CREDIT EVALUATION

- Do you know your personal credit score? Yes or No If so, what are Score(s)? _____
- Do you know if you have a D & B Business Credit File? Yes or No Do you know your D & B Paydex Score? _____
- Do you have any UCC Lien Filings? Yes or No Amount(s)? _____ What is the UCC Filing on? _____
- Do you have any existing Credit Lines? Yes or No Balance(s)? _____ With Who? _____

MISCELLANEOUS INFORMATION

Do you have any federal & state taxes past due? Yes or No If yes, how much: Federal \$ _____ State \$ _____

Are you currently under the protection of the United States Bankruptcy Laws? Yes or No

Have you been turned down previously: (This information is critical in determining what issues that need to be overcome).

By whom and Reason(s): _____

Are you currently working with any lender, consultant or broker on this transaction? Yes or No

If yes, who: _____

AGREEMENT

I/We completed an application containing various information and certify that all of the information is true and complete. I/We further hold FUNDINGEDGE and/or Power2Fund and/or its assigns harmless of any misrepresentation on the *Business Financing Application* and/or other documents provided. I/We hereby authorize FUNDINGEDGE and/or Power2Fund and/or its assigns to investigate my credit worthiness and verify any information provided on my/our application and other related documents.

Business Name

Signature	Printed Name	Title	Date
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Signature	Printed Name	Title	Date
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Be sure to complete the application thoroughly for expedient processing, missing info will delay processing. **Must Sign Forms.**

AUTHORIZATION TO OBTAIN CREDIT INFORMATION

I / We represent and warrant that the information provided in this credit application is complete, accurate and true. Each individual signing below also requests and authorizes any lenders or funding source which may be utilized (collectively referred to as "Lenders") to obtain information from the references listed above and obtain commercial and/or consumer credit histories that will be ongoing and relate not only to the evaluation of the business credit requested, but also for purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed.

[A facsimile, electronic or other copy of this signed authorization shall be as valid as the original.](#)

X

Applicant's Signature

Applicant's Printed Name

Date

X

Applicant's Signature

Applicant's Printed Name

Date

X

Applicant's Signature

Applicant's Printed Name

Date

ADDITIONAL DOCUMENTATION

Please submit application with:

- **Two Forms of Identification – Enlarged**
This is to be sure we have proper identities & protects all parties.
- **Application & Authorizations (3 Forms) - Signed**

Forward the above Information and Application to:

- Fax (210) 280-0069
- Email to newapps@power2fund.com for fastest processing

*The following **“May Be” Requested** to process your application. Should we need any of the following we will advise after receipt of initial application unless directed otherwise.*

1. Copy of a **Voided** Company Check
2. Copy of Business License (A business License for Each Location)
3. Vendor Invoice for Equipment Purchases **if available*
4. 2 - 3 Years Business Tax Returns
5. Yr-to-date Business Financials
6. 2 - 3 Years Personal Tax Returns
7. Merchant Statements - (6-12 months - all pages) *(Must have for Cash Advances)*
8. Bank Statements - (6-12 months - all pages) *(Must have for Cash Advances & Business Loan Programs)*
9. Personal Financial Statement
10. Equipment List
11. Passport, Voter ID or Social Security Card

***Be sure to complete the application thoroughly for expedient processing,
missing info will delay processing.**

PLEASE Sign All 3 Forms.