

General Information

1. Exact legal name of business _____
2. Trade name or DBA _____ 2a. Federal I.D. # _____
3. Previous name _____
4. Business address _____
5. Mailing address _____
6. Business phone _____ 7. Fax # _____ 7a. Cellular # _____
8. Date business started _____
9. Check one: Corporation Year _____ State _____
 Proprietor
 Partnership
 Other
10. Has there been a change of ownership in the last 12 months or a change of name of business? Yes No
 If yes, explain. _____
11. Check one: Manufacturer
 Wholesaler
 Jobber
 Retailer
 Other (describe)
12. Do any of the owners have any lawsuits pending at this time? Yes No
 12a. Do any of the owners owe back taxes? Yes No
13. List all businesses owned by any or all owners in the last fifteen years. (List on additional sheet.)

Receivable Information

14. Total receivables now outstanding \$ _____ 1-30 _____ 30-60 _____ 61+ _____
15. Approximate number of customers _____ 16. Average invoice amt. \$ _____
17. Average number of invoices per month _____ 18. Average days receivables pay _____
19. Terms of sale _____ 20. Fiscal year from _____ to _____
21. Top ten clients account for _____% of total yearly sales.
22. Anticipated number of customers to be factored _____
23. Average number of invoices to be factored per month _____

24. Has this company ever factored or pledged its receivables? Yes _____ No _____

25. Are the company receivables presently factored or pledged? Yes _____ No _____

26. Has any company with whom an officer, owner or director has been associated in the last ten (10) years factored or pledged its receivables? Yes _____ No _____

27. Are there any federal and/or state taxes past due? Yes _____ No _____

28. Are there any federal and/or state tax liens filed or pending? Yes _____ No _____

29. Has this company or its principals ever filed or been involved in bankruptcy? Yes _____ No _____

30. If any questions 24 through 29 were answered yes, please give all details including names and addresses of any party to whom receivables were factored or pledged. Include date and name of companies who factored your receivables.

31. Please list all officers, owners and/or directors of the company.

Full name _____

Home address _____
Street City State Zip

Home phone _____ Social Security Number _____

Date and place of birth _____ Driver's License Number _____

Previous address _____

Title _____ Director? Yes _____ No _____ Ownership % _____

Spouse's name _____ SS# _____

Full name _____
Street City State Zip

Home address _____

Home phone _____ Social Security Number _____

Date and place of birth _____ Driver's License Number _____

Previous address _____

Title _____ Director? Yes _____ No _____ Ownership % _____

Spouse's name _____ SS# _____

Full name _____

Home address _____
Street City State Zip

Home phone _____ Social Security Number _____

Date and place of birth _____ Driver's License Number _____

Pervious address _____

Title _____ Director? Yes _____ No _____ Owner % _____

Spouse's name _____ SS# _____

32. How did you learn about American Receivable Corp.? _____

Financial Information

33. Bank presently used: _____

Name _____

Address _____

Phone _____ Account Name _____ Account # _____

Officer _____

34. Please include all of the following when submitting your application:

- a. First page of Articles of Incorporation
- b. D/B/A, assumed or trade name certificate
- c. Most recent accounts receivable aging
- d. Most recent accounts payable aging
- e. Most recent profit and loss statement and balance sheet
- f. Current customer listing with contact names, telephone and fax number
- g. Copy of each owners' drivers license
- h. Previous 4 quarters payroll tax filings or proof of payroll taxes paid

35. On a separate sheet, list four suppliers, including landlord, complete address and phone number.

Note: Include one copy of your bank deposit slip.

The information supplied herein to American Receivable Corporation is true and correct to the best of my knowledge. I authorize American Receivable Corporation to investigate my business and personal credit through its various agencies for the purpose of evaluation and verification.

Signed by _____ Title _____ Date _____