

**Company Profile**

Company Name						DBA		
Address			City		State		Zip	
Mailing Address			City		State		Zip	County
Telephone			Fax		E-mail		Website	
Fed I.D. Number			State Tax Number		DUNS Number		Total Num. Of Employees	
Year Established		Type of Business    Proprietor    Partnership    LLC    S-Corp    Corporation				Year Filed		State

**Owners / Officers**

Name			Title		% Ownership			
Home Address			City		State		Zip	Own    Rent
Home Telephone		DOB	Social Security Number					
Driver's License Number			State Issued		Expiration Date			
Name			Title		% Ownership			
Home Address			City		State		Zip	Own    Rent
Home Telephone		DOB	Social Security Number					
Driver's License Number			State Issued		Expiration Date			
Name			Title		% Ownership			
Home Address			City		State		Zip	Own    Rent
Home Telephone		DOB	Social Security Number					
Driver's License Number			State Issued		Expiration Date			
Name			Title		% Ownership			
Home Address			City		State		Zip	Own    Rent
Home Telephone		DOB	Social Security Number					
Driver's License Number			State Issued		Expiration Date			
Name			Title		% Ownership			
Home Address			City		State		Zip	Own    Rent
Home Telephone		DOB	Social Security Number					
Driver's License Number			State Issued		Expiration Date			

**Bank References**

Institution						Contact	
Address			City		State		Zip
Telephone		Fax	Account Number		Checking    Savings Installment Loan    Lease    Other		
Institution						Contact	
Address			City		State		Zip
Telephone		Fax	Account Number		Checking    Savings Installment Loan    Lease    Other		

**Sales Information**

Projected Sales Volume Next 12 Months (\$)		Sales Volume Previous 12 Months (\$)		A/R Turnover
Avg. Monthly Sales Vol. (\$)	Avg. Number of Inv.	Avg. Inv. Amount (\$)	Are any sales made on consignment or guaranteed sales? Yes No	
Return Policy	Warranty Period	Billing Frequency (e.g. Daily, Weekly, Monthly)		
Briefly describe the nature of your product or service:				

**Secured Party Information**

Have you given a security interest in, or made an Assignment of, your accounts receivable? Yes No			If yes, to whom? (Name)	
Address		City	State	Zip
Telephone	Fax	Contact		
Have you given a security interest in, or made an Assignment of, your accounts receivable? Yes No			If yes, to whom? (Name)	
Address		City	State	Zip
Telephone	Fax	Contact		

*Have you, this company, its officers or directors, or any affiliated companies ever...*

Been convicted of a felony? Yes No

Filed bankruptcy or had a petition on bankruptcy filed against it? Yes No

Made an assignment for the benefit of creditors? Yes No

Had a receiver appointed? Yes No

Had or have a Federal, State, County or Municipal lien/levy filed against it? Yes No

Been involved or are currently engaged in, or threatened with any litigation? Yes No

**Additional Information:**

Are you currently past due on any federal or state taxes? Yes No

Do you currently have a payment plan for delinquent taxes? Yes No

Do you purchase products or services from your customers? Yes No

Are there any unsatisfied judgments against your business? Yes No

Are all licenses and permits required to operate your business current? Yes No

Do you anticipate a major change in ownership or management in the next 12 months? Yes No

Are regular financial statements prepared? Yes No

# Accounts Receivable Financing Application



*To expedite the approval process, please complete / attach the items below and fax to 877-529-0184 or email to [info@gmafactor.com](mailto:info@gmafactor.com)*

1. Completed and Signed Application
2. Financial Statement – Business (previous 2 years as well as most recent interim statement)
3. Accounts Receivable Detail and Summary Aging – Most Recent
4. A Copy of a Complete Invoice and Supporting Documents
5. Copy of Organizational Documents e.g. Articles of Incorporation, Articles of Organizations, By Laws, Operating Agreement, etc.
6. Copy of DBA filing (if applicable)
7. Personal Financial Statement (all owners)
8. Accounts Payable Summary Aging
9. Customer List with Address, Zip Code, and Phone Numbers

By executing this application, the undersigned certifies to the following: The information set forth in this application and in the documents, schedules, reports, statements, and / or other information provided to GMA Inc. with or pursuant to this application are full, true, correct, and complete and accurately reflect such information on the date(s) thereof; that GMA Inc., or assigned, is authorized to request, receive, and verify credit reports and other financial information regarding applicant and its business that GMA Inc. deems necessary and appropriate; that GMA Inc. is authorized to execute in the name of the undersigned person(s) and file against the undersigned person(s) in favor of GMA Inc. financing statements with respect to the undersigned person(s) assets; and that GMA Inc. is authorized to inquire of, investigate, confirm, and verify any information contained in this application, in any documents, schedules, reports, statements, and / or other information provided under or pursuant to this application, or learned by GMA Inc. as part of its investigation and review of this application, applicant, or applicant's business.

“To help the government fight the funding of terrorism and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify, and record information the identifies each person (individuals or business) who opens an account.”

“What this means to you: When you open an account or add any additional services, we will ask you for your name, address, federal employer identification number and other information that will allow us to identify you. We may also ask to see other identifying documents.”

*All owners / officers listed above must complete and sign below*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_