

Application for Factoring

Company Information

Full Business Name: _____ Legal Name (if different): _____

Business Address: _____

Street or PO Box

City

County

State

Zip

Business Phone: _____ Fax: _____ Email: _____

Business Website: _____

Structure: C Corporation S Corporation D/B/A Partnership Sole Proprietorship LLC

Years in Business: _____

If doing business at places other than Principal Place of Business / Corporate Office, list all additional addresses:

Has there been a change of business name or ownership within the last five years? yes no _____

If yes, please describe: _____

Describe primary source(s) of business activity:

Tax Information

Federal Tax ID#: _____

Do you have any Federal or State taxes overdue? yes no If yes, have any liens been filed? yes no

Are any Federal or State tax returns under audit? yes no If yes, explain: _____

Principal / Corporate Officer Information

Enter information pertaining to all Business Owners or Corporate Officers:

1. Title: _____ Name: _____ Home Phone: _____

Home Address: _____

Social Security #: _____ Date of Birth: _____ Drivers Lic. State and #: _____

Has been convicted of a felony? yes no If yes, explain: _____

2. Title: _____ Name: _____ Home Phone: _____

Home Address: _____

Social Security #: _____ Date of Birth: _____ Drivers Lic. State and #: _____

Has been convicted of a felony? yes no If yes, explain: _____

Company Banking Information

Bank Name: _____ Contact: _____

Phone: _____ Address: _____

Checking Account #: _____ Savings Account #: _____

Financial History

Attach any relevant explanatory information relating to answers to the following questions.

Has Business ever declared bankruptcy? Yes No

Is Business or its principals Defendant(s) in any legal actions? Yes No

Are any Liens currently placed against Applicant's Accounts Receivable Yes No

(or are your Accounts Receivable pledged as collateral)?

Does Business have any outstanding business loans? Yes No

If yes, please provide: Name of Financial Institution: _____

Phone: _____ Address: _____

Loan Amount: _____ Collateral pledged: _____

Has Business previously factored? Yes No

If yes, name of previous factor: _____

Attachment Checklist

In order to complete the factoring application, Hamilton must conduct due-diligence and verify applicant's legal standing and personal identity with associated business owners and/or corporate officers. Please include the following documents to ensure a speedy response:

- Copy of company's Certificate of Incorporation or similar document
- Recent internally prepared Balance Sheet and Income Statement
- Current Accounts Receivable aging report
- Current Accounts Payable aging report
- Last corporate tax return
- Evidence of Payroll Tax compliance (e.g. copy of check or bank receipt)
- Any relevant press releases, press coverage, or product literature that might help Hamilton familiarize itself with products and/or services offered.
- As required by the USA Patriot Act, a photocopy of the Business Owner's or Corporate Officer's Drivers License, or similar version of official photo identification.

If you have any questions or need clarification on any part of this application, call Hamilton at 800-351-3066.

Please fax, email or send the following application along with check list items to: **The Hamilton Group**
PO Box 352
North Syracuse, NY 13212-0352
Fax: 315-413-0087
Email: info@hamiltongroup.net

I represent and warrant that the information on this Application to The Hamilton Group (Delaware), Inc. ("Hamilton") is true and correct to the best of my knowledge and no material information has been omitted. If a change occurs to materially affect my answers to the questions herein, I will so notify Hamilton immediately. Unless this happens, Hamilton may rely on this application as true and accurate as of the date below. Hamilton and its designee(s) are authorized to check the Applicant's credit (including my personal credit, or the personal credit of the principals and/or officers of the Applicant) and make all other inquiries that Hamilton deems necessary to verify the accuracy of the statements made on this form and to determine my creditworthiness. This application and any attachments remain the property of Hamilton.

Applicant Signature

Co-Applicant Signature

Date

Date