

Phone: 1(305) 814-4265 Fax: 1(888)-508-8445 www.unicuscapital.com

## **CLIENT APPLICATION**

GENERAL					
Full Corporate Name				Incorporation Date	
Type of Business				Website:	
Trade Names				Email:	
Business Address				Phone #	
City	State	Postal C	ode	Fax#	
			•		
	BAN	K			
Bank				Account #	
Street Address				Date Opened	
City	State Postal Code		Code	Line of Credit Amount	
Phone #	Phone # Fax # Security				
PRINCIPALS					
Shareholder / Partner / Owner (1)				S.S.N.	
Title		% of Ownership		Date of Birth	
Home Address		Own	Rent	Phone #	

Shareholder / Partner / Owner (2)					S.S.N.
Title			% of Ownership		Date of Birth
Home Address	Home Address			Rent	Phone #
City	City State		Postal Code		Fax#
			-		
Shareholder / Partner / Owner (3)					S.S.N.
Title			% of Ownership		Date of Birth
Home Address			Own	Rent	Phone #
City	State		Postal Code		Fax#
			•		
		RECEIVA	ABLES		
What is the purpose of the funds to be generated?					Average Annual Sales:
Present amount of Receivables:	Terms	Terms of Sales		mers:	Average Monthly Sales:
Are receivables pledged as  If YES, to whom are they pledged?  collateral: YES / NO					
Do you do consignment or g	uarantee	d Sales? YES / NO			
		TOP 5 RECE	CIVABLES		
Name:	e: Address:				Phone:
Name: Address:				Phone:	
Name: Address:				Phone:	

Name:	Address:	Phone:		
Name:	Address:	Phone:		
	GOVERNMENT REMITTANCE			
Do you owe source deductions: YES / NO If YES how much do they owe:				
Do you owe remittances: YES / NO If YES how much do they owe:				
Do you owe Workers Compensation: YES / NO If YES how much do they owe:				
Do you owe Income or Sales Taxes: YES / NO If YES how much do they owe:				
OTHER				

OTHER			
Attorney	Firm	Phone #	
Accountant	Firm	Phone #	
Insurance Agent	Firm	Phone #	

SUPPLIER INFORMATION				
Principal supplier 1	Product supplied	Phone #	Fax#	
Principal supplier 2	Product supplied	Phone #	Fax#	
Principal supplier 3	Product supplied	Phone #	Fax#	

I hereby declare the provided information to be true and accurate to the best of my knowledge. This serves as my permission for the release of any information regarding this application to Unicus Capital and its affiliates for the purpose of credit investigation.			
Signature		Date	
Print Name		Print Title:	