

APPLICATION TO ENTER INTO A SECURITY AGREEMENT WITH THE COMMERCIAL FINANCE GROUP

1. BUSINESS NAME:	····	2 Г)BA:			
3. ADDRESS:	4. PHONE:					
5. CITY, STATE, ZIP:						
7. PRODUCT OR SERVICE:						
9. STATE WHERE FILED:		COUNTY:				
10. TYPE OF COMPANY: C-corp S-Corp	o Partnership LLC	Sole Proprietor				
11. IF PROPRIETORSHIP / PARTNERSHIP OR	•	•	nent filed in?			
12. HOW DID YOU FIND US?	•				/	
13. COMPANY OWNERS AND / OR OFFICERS	- Personal and residence inform	nation:				
NAME:			Telephone			
Driver License # and State:						
NAME:						
Address:				/		
Driver License # and State:						
NAME:						
Address:						
Driver License # and State:						
14. RECEIVABLES: Open:						
15. SALES VOLUME: Average Monthly: \$						
16. BANK INFORMATION, Business						
Bank or S & L Name:			ontact:			
Account Number:			elephone:			
17. BANK INFORMATION, Personal, Primary Own		T	elephone:			
Bank or S & L Name: Checking Account Number:						
Checking Account Number.	Savings Acct. Number		Contact			
18. PROFESSIONAL INFORMATION:						
Name and phone number of Attorney:						
Name and phone number of Accountant:						
Regular Financial Statements prepared: Yes	NoHow C	Often:	Last One:			
Copy of Financial Statement attached (Essential): Ye	s: No:					
Customers buying from "Contra" Account position (ba	rtering)?					

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19. TAX NUMBERS AND	INFORMATIO	N:				
Federal Tax Number:		State Tax	Number:	Local Tax Number:		
20. PRINCIPAL SUPPLIE	RS:					
			Contact:	Phone Number:		
			Contact:			
			Contact:			
21. ASSETS ASSIGNED,	PLEDGED, LI	ENED, OR AS	COLLATERAL FOR LOANS			
ACCOUNTS RECEIVAB	BLE: Yes:	No:	To Whom:	Address:		
City, State, Zip:						
INVENTORY:	Yes:	No:	To Whom:	Address:		
City, State, Zip:				Telephone:		
EQUIPMENT:	Yes:	No:	To Whom:	Address:		
City, State, Zip:				Telephone:		
FIXTURES:	Yes:	No:	To Whom:	Address:		
City, State, Zip:				Telephone:		
OTHER:	Yes:	No:	To Whom:	Address:		
City, State, Zip:				Telephone:		
the documents, schedule this application are full, FINANCE GROUP ma (collectively, "Assignees' reports and other finance necessary and appropria confirm, and verify any provided under or pursu and review of this applic signature. A document releases any claims agai	ss, reports, state true, correct, y share this "), and THE (cial information ate; and (3) the information mant to this application, applications to the considered and THE COM	tements, and/of and complete application a COMMERCIA on regarding a hat THE CO. contained in plication, or lent, or application when MMERICAL 1	or other information provided and accurately reflect such and any supporting documental FINANCE GROUP and pplicant and its business the MMERCIAL FINANCE Graphics application, in any document of the provided by THE COMMERCIAL Susiness. Please be awas returned by an electronic	e following: (1) The information set forth in this application and in led to THE COMMERCIAL FINANCE GROUP with or pursuant to an information on the date(s) thereof; (2) that THE COMMERCIAI tentation with its agents, representatives, affiliates and designees led its Assignees are authorized to request, receive, and verify creditat THE COMMERCIAL FINANCE GROUP or its Assignees deem ROUP and its Assignees are authorized to inquire of, investigate cuments, schedules, reports, statements, and/or other information CIAL FINANCE GROUP or its Assignees as part of its investigation re that an electronic signature is as legally binding as a handwritter form of written communication, i.e.: email. Applicant waives and assignees and any information providers relating to the requesting ion.		
Dated:	Si	gned: X				
		-				
Dated:	Si	gned: X		Title:		