

**CERTIFICATION BY OFFICERS**

LEGAL BUSINESS NAME,  
(herein the "Company"): \_\_\_\_\_

DBA'S: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

WEBSITE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADDT'L ADDRESS (OTHER BUSINESS LOCATIONS): \_\_\_\_\_

\_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

TYPE OF ENTITY:

WILL NEED A COPY OF:

- |  |   |
|--|---|
| <input type="checkbox"/> Sole Proprietorship           | Fictitious Business Name Statement            |
| <input type="checkbox"/> Limited Partnership           | Certificate of Limited Partnership            |
| <input type="checkbox"/> General Partnership           | Statement of Partnership Authority            |
| <input type="checkbox"/> Corporation                   | Articles of Incorporation                     |
| <input type="checkbox"/> Limited Liability Company     | Articles of Organization                      |
| <input type="checkbox"/> Limited Liability Partnership | Registration of Limited Liability Partnership |

Please identify the owners/principals/officers of the Company and indicate respective percentage of ownership in the Company:

- 1. \_\_\_\_\_ (     %) TITLE \_\_\_\_\_
- 2. \_\_\_\_\_ (     %) TITLE \_\_\_\_\_
- 3. \_\_\_\_\_ (     %) TITLE \_\_\_\_\_
- 4. \_\_\_\_\_ (     %) TITLE \_\_\_\_\_

THE FOLLOWING HAVE SIGNATORY POWERS AS TO ALL TRANSACTIONS CONCERNING THE COMPANY:

- 1. \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_
- 2. \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_
- 3. \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_
- 4. \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PLEASE LIST THE FOLLOWING:

D.U.N.S. NUMBER: \_\_\_\_\_  
FED. ID NUMBER: \_\_\_\_\_ STATE ID NUMBER: \_\_\_\_\_  
FEDERAL/STATE TAX PAST DUE: (    ) YES (    ) NO

BANK INFORMATION

BUSINESS BANK: \_\_\_\_\_  
ADDRESS, CITY, ZIP: \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_ PHONE \_\_\_\_\_

BORROWING LINE (\$): \_\_\_\_\_ OWING: \_\_\_\_\_  
(    ) SECURED OR (    ) UNSECURED YEARS W/BANK \_\_\_\_\_

AVERAGE BANK BALANCE (\$): \_\_\_\_\_  
NAME OF BANK OFFICER: \_\_\_\_\_ PHONE: \_\_\_\_\_

AGENT INFORMATION:

NAME OF ACCOUNTANT: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ACCOUNTING FIRM: \_\_\_\_\_  
ADDRESS, CITY, ZIP: \_\_\_\_\_

NAME OF ATTORNEY: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS, CITY, ZIP: \_\_\_\_\_

NAME OF INSURANCE AGENT: \_\_\_\_\_ PHONE: \_\_\_\_\_  
INSURANCE FIRM: \_\_\_\_\_ POLICY # \_\_\_\_\_  
ADDRESS, CITY, ZIP: \_\_\_\_\_

GENERAL BUSINESS INFORMATION:

WHEN DID THE COMPANY START: \_\_\_\_\_ DATE INCORPORATED: \_\_\_\_\_  
STATE OF INCORPORATION OR AUTHORIZED TO CONDUCT BUSINESS: \_\_\_\_\_

RECEIVABLES NOW OPEN (\$): \_\_\_\_\_ AVG. MO. SALES (\$): \_\_\_\_\_  
APPROX. # OF ACCOUNTS: \_\_\_\_\_ TERMS: \_\_\_\_\_

HAVE YOU EVER AND/OR ARE YOU CURRENTLY FACTORING/FINANCING?  
( ) YES ( ) NO

IF YES, WITH WHOM: \_\_\_\_\_

1) ARE RECEIVABLES NOW PLEDGED AS COLLATERAL ? ( ) YES ( ) NO

2) IS THERE PROPERTY OTHER THAN RECEIVABLES, EITHER BUSINESS OR PERSONAL,  
PLEDGED AS COLLATERAL?: ( ) YES ( ) NO

IF YES, WHAT AND TO WHOM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) THE CORPORATION IS DULY QUALIFIED TO TRANSACT BUSINESS AS A FOREIGN  
CORPORATION IN THE STATE(S) OF: \_\_\_\_\_

4) DOES BUSINESS/CORPORATION OWN PROPERTY REAL AND/OR PERSONAL ?  
( ) YES ( ) NO

IF YES, BRIEFLY LIST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) LEGAL (GENERAL OVERVIEW): HAS COMPANY EVER BEEN SUED?  
( ) YES ( ) NO

IF YES, BRIEF EXPLANATION OF EVENTS ON ALL SUITS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 1) This will acknowledge that the undersigned has requested that Continental Business Credit, Inc., consider a factoring or financing arrangement with the Company pursuant to which Continental would, among other things, be assigned or purchase the Company's accounts receivable and/or make and extend loans, advances and other financial accommodations to the Company. Continental's entering into any such financing arrangements or extending any financial accommodations to the Company would be conditioned upon the fulfillment of a number of conditions, including, without limitation, the execution and delivery of Continental's standard form documentation, and the approval by Continental of the proposed transaction(s).
  
- 2) In connection therewith the undersigned hereby authorizes Continental to obtain from Dun & Bradstreet, TRW, Trans Union, Credit Exchange, or any other credit bureaus and reporting agencies, reports concerning the personal, business and financial background and history of the Company or the undersigned.
  
- 3) There is no provision in the Certificate of Incorporation or Bylaws of the corporation, or in the laws of the State of its incorporation, requiring any vote or consent of shareholders to authorize the mortgage or pledge of or creation of a security interest in any assets of the corporation. Such power is vested exclusively in its Board of Directors and officers of said corporation.
  
- 4) Prompt written notice will be given to you of any change or amendment with respect to any of the foregoing matters. Until such notice is received by you, you shall be entitled to rely upon the foregoing in all respects.
  
- 5) The Company agrees to reimburse Continental any and all costs, fees, expenses and actual attorneys fees in connection with investigating the Company, including but not limited to, all filing, recording, publication, search and other costs incurred by Continental under and pursuant to this agreement, or any other present or future agreement, or in connection with any transaction contemplated by the parties.

Authorization

Applicant/Company Name: \_\_\_\_\_

By: \_\_\_\_\_

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

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

By: \_\_\_\_\_

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

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