



INVOICE FACTORING | PURCHASE ORDER FINANCING | ALTERNATIVE LENDING

PROSPECTIVE CLIENT APPLICATION

COMPANY INFORMATION

PROSPECT NAME: _____
TRADE STYLE/FICTITIOUS NAME(S): _____
FEDERAL TAX ID No: _____

ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
TEL: _____ EMAIL: _____
FAX: _____ WEBPAGE: _____
CONTACT PERSON: _____ POSITION: _____

BUSINESS INFORMATION:

TYPE OF BUSINESS (CHECK ONE):
_____ MANUFACTURER _____ WHOLESALE _____ OTHER

BRIEF DESCRIPTION OF BUSINESS: _____

STATE OF INCORPORATION/FORMATION: _____ DATE _____ ESTABLISHED: _____

APPROXIMATE NUMBER OF EMPLOYEES: _____ OTHER OFFICE LOCATIONS (Y/N)? _____

IF YES, WHERE ARE OTHER LOCATIONS? _____

AVERAGE MONTHLY BILLING: \$ _____ % OF WHICH YOU WISH TO FACTOR: _____

AVERAGE INVOICE AMOUNT: _____ EST. TOTAL ANNUAL SALES: _____

- PLEASE INCLUDE A YEAR-END FINANCIAL STATEMENT AND A/R DETAILED AGING IF AVAILABLE

J & D FINANCIAL (WEST COAST) CORPORATION

CFL LICENSE NO. 603 L097

WWW.JDFINANCIAL.COM

PO Box 610250

NORTH MIAMI, FL 33181

T: 800.421.1120

CALIFORNIA

435 N. BEVERLY DRIVE, SUITE 203

BEVERLY HILLS, CA 90210

T: 310.282.8819 | F: 844.863.7087

FLORIDA

13899 BISCAYNE BLVD., SUITE 148

NORTH MIAMI BEACH, FL 33181

T: 305.893.0300 | F: 786.621.4830

CUSTOMER INFORMATION:

TOP ACTIVE ACCOUNTS (LIST NAME, ADDRESS, CITY, STATE AND PHONE):

1. _____
2. _____
3. _____

EXISTING FINANCIAL RELATIONSHIPS

BANK NAME: _____ CITY: _____ STATE: _____

BANK OFFICER'S NAME: _____ TEL: _____

EMAIL: _____

TYPE OF CREDIT FACILITY (CHECK ALL THAT APPLY):

___ TERM LOAN ___ REVOLVING CREDIT LINE ___ OTHER

ARE RECEIVABLES OR INVENTORY PLEDGED AS COLLATERAL? (Yes/No): _____

NAME OF OTHER LENDERS YOU HAVE USED OR ARE CURRENTLY USING:

1. _____
2. _____
3. _____

Referred by: _____

ALL OF THE STATEMENTS MADE HEREIN AND ALL INFORMATION IN DOCUMENTS PROVIDED HERewith ARE TRUE AND CORRECT AND THE APPLICANT(S) UNDERSTAND THAT J&D INTENDS TO RELY THEREUPON IN DETERMINING WHETHER TO ENTER INTO A FINANCING RELATIONSHIP. APPLICANT HEREBY AUTHORIZES J&D TO VERIFY ANY AND ALL OF THESE STATEMENTS IN ANY WAY THAT IT MAY CHOOSE AND TO PROCURE ALL CREDIT REPORTS OF THE PRINCIPALS OF THE APPLICANT COMPANY. IN ADDITION, APPLICANT FURTHER AUTHORIZES ITS SUPPLIERS, CUSTOMERS, ACCOUNTANT, ATTORNEYS, EMPLOYEES AND CREDIT AGENCIES TO SUPPLY TO J&D OR ITS EMPLOYEES ANY INFORMATION IT MAY REQUEST. A COPY OF THIS AUTHORIZATION MAY BE ACCEPTED AS IF IT WERE AN ORIGINAL.

Prospective Applicant:

By: _____

Name: _____

Title: _____

Date: _____

Please return to info@jdfinancial.com