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Phone: San Antonio: 210-558-2842. El Paso: 915-538-7741

Email: info@swcreditlender.com Website: www.swcreditlender.com

Financing Application- All Industries

Please complete all information required as per instructions from your Account Executive

Please signed and return via email

				Piease signea ana rei	urri via erria	II .		
Business Inf	formatio	n						
Company Na	me: (If propr	ietorship, name th	e individual followed by	assumed company or busines	s name.)			
Company Ad	dress:							
City:			State:		Zip:		County:	
Business Stru	icture: (Pro	prietorship, Partne	ership, Corporation, LLC					
Company's Si	ubsidiarie	s and Affilia	tes:					
Additional Lo	cations? I	f yes, where	e?					
D.			I-		haz t :			
Phone:			Fax:		Website:			
D&B:						Fed. Tax ID:		
Date Establis	hed:	Date inc.:		State inc.:	Permanent E	mployees	Annual Sales:	
For Transpo	rtation I		•					
# of Tractors		# of Trailer	S	Total Owner Ops	Total Direc	t Drivers	Carrier Authori	ty Yes or No
# of Tractors Paid for # Tra Business Des	ictors	Paid for # o	of Trailers	Financed # tractors	Financed #	Trailers	Broker of Cargo	as well?
Business Des	cription:							
	•							
	mpany ov	vn real estat	te? (yes or no)		Is the bus	iness space lease	d? (yes or no)	
Does your co Contact:			Phone:		Email:	·		
	nt/Owne	r's Informa	ation (require	d info for those w	ith over 5	% ownership)		
Name:			<u> </u>	Title:		•	Ownership %	
SS#:			Date of Birth:		DL#:		State:	
Home Addres	ss:				•			
Home Phone	•			Cell Phone:			Married?	
Home Phone								
Email:								
Spouse's								
Name			Date of Birth:		SS#:			
1. Family Ref	erence:				Phone:			
Address:								
2. Family Ref	erence:				Phone:			
Address:								
Name:				Title:			Ownership %:	
SS#:			Date of Birth:		DL#:		State:	



						'When Others Say NO We Can Say YES'
Home Addres	ss:					
Home Phone:	•		Cell Phone:		Married?	
Email:						
Spouse's						
Name:		Date of Birth:		SS#:		
1. Family Refe	erence:			Phone:		
Address:						
2. Family Refe	erence:			Phone:		
Address:						
Name:			Title:		Ownership %:	
SS#:		Date of Birth:		DL#:	State:	
Home Addres	ss:					
Home Phone:	:		Cell Phone:		Married?	
Email:						
Spouse's		Date of Birth:		SS#:		
1. Family Refe	erence:			Phone:		
Address:				•		
2. Family Refe	erence:			Phone:		
Address:						
Banking Info	ormation					
Bank Name:				Account:		
Contact:				Phone:	Fax:	
Bank Name:				Account:		
Contact:				Phone:	Fax:	
CPA Firm						
Company Nar	me:			Policy:		
Contact:			Phone:		Fax:	
Attorney Fi	rm					
Company Nar	me:			Policy:		
Contact:			Phone:		Fax:	
Insurance Ca	arrier Inf	ormation				
Company Nar				Policy:		
Contact:			Phone:	,	Fax:	
Bonding						
Currently bor	nded?	Bonding Company				
Single Project	t Limit:	Соттриту		Aggregato Limit:		
Single Project	LIIIIII.			Aggregate Limit:		
	Have yo	ou ever been refused Bond (yes or no) If Yes explain why?	ling?			

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Organization/Management/Cir	ro dotails of al	I Company and D	reenal\			Non-Bank National Funder When Others Say NO We Can Say YES:
Organization/Management(Giv			ersonai)			
Have you or your company ever fil (yes or no) If Yes explain why?	ed for bankrupt					
Organization/Management(Giver of the large o						
Do you have any Federal or State F						
		_				
Do you have any Federal or State F						
Have any or your prior Tax Returns						
When was a Physical Inventory las						
amount of the Inventory? Is the in	ventory pledged	l?				
Is there any current or proposed li	tigation, filings,	negotiations, etc?				
If yes please provide details on add	d. Sheets	_				
Is rent current? If not, please povid		ditiona sheet				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Customer Information (Referen	nces)					
<u>Customer Name</u>	Ac	ddress		<u>Contact</u>	Phone	<u>Numbers</u>
Supplier Information (Reference	ces)					
Main Suppliers		ct Supplied		Contact	Phone	Numbers
а осружен				<u></u>	<u> </u>	
Landlord (reference)						
·	Ι Λ.	dross	l	Contact	Phono	Numbers
Name Ac		<u>ddress</u> <u>Cor</u>		CONTACT	riione	ivallibers
Debt Schedule Must include all	l secured credi	tors-complete de	bt schedu	ule attached)		
		•	Lease or	,		
<u>Lender</u>	Start Date	Due Date	Loan	Original Amount	Balance	Interest Rate
Deid for Forders						
Paid for Equipment					1 137	I .,
Equipment Description		<u>Number of Units</u>		Estimated Market Value		<u>Year</u>
Real Estate Schedule						



	Address of Real Estate Ov	wned	Estimated Market Value	Homes	ist Type: tead, Residential, percial, Industrial	1st Mortgage	2nd Mortgage
_	Address of Real Estate of	<u>wrieu</u>	<u>value</u>	Commi	ierciai, iliuustiiai	13t Wortgage	2110 Mortgage
ĕ							
nha							
פונ	Receivables			_			
	Current Outstanding Receivables' T	otal					
	Retainage Receivables' Total			Approxim	ate Number of Cu	istomers:	
Б	Are receivables pledged as collater	al?					
on	Name of Bank or Factoring compar	ny					
=	Pre-payment penalties by current f						
doc	Have you ever used a factor? Who	?					
ק		L	IST THREE (3) LARGI	EST CLIENT	rs		
							or
7	Company Name		<u>Address</u>		Monthly Inco	me Amount	Commercial
PO							
_							
	Purpose and Amount				ī		
	<u>-</u>				Yes or No	Am	ounts
	Contract Receivables Financing-Pro						
	Accounts Receivable Financing -Fin						
	Factoring						
	Structured Financing (Short and Lo						
	Equipment Financing/Leasing						
	Purchase Order Funding						
	Commercial Real Estate						
	Financial and Administrative Mgmt	of your Busine	ss (All Industries)			r	n/a
	Other						

Authorization To Obtain Credit

By signing below, each undersigned individual who is either a principal of the finance / lease application listed below or a personal guarantor of its obligations, provides written instruction to Lender or its Designee (and any Assignee or Potential Assignee thereof) authorizing review of his/her credit profile considering the application of the credit application and subsequently for the purpose of updating, renewal, or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile of this authorization shall be valid as the original. In addition to authorizing review of My/Our credit profile from any national credit bureau, the undersigned also authorizes My/Our financial institutions and creditors to release credit information required by Lesser or its Designee (and any Assignee or Potential thereof).

Company Name:	
	Company Name:



Signature:	Date:	
0		
- ·		
Signature:	Date:	
Signature:	Date:	
	Signature: Signature: Signature:	Signature: Date: