

# RESOURCE BUSINESS PARTNERS, INC.

20252 Viewcrest Court  
San Jose, CA 95120  
408 997-1504 Office  
408 997-6703 Fax

Once completed, please send to jeff@rbpfactoring.com

## Confidential Factoring Application

Application Date \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Company City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_ Date Established \_\_\_\_\_

Business Description \_\_\_\_\_

Sole Proprietor     Partnership     Corporation     LLC

State of Incorporation \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

### Principals and Stockholders

Name \_\_\_\_\_

Title \_\_\_\_\_ % Owned \_\_\_\_\_

Home Address \_\_\_\_\_

(Must be Home Address >>> No PO Box)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Home Fax (\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issued \_\_\_\_\_

Do you have interest in any other business ?     Yes             No

If yes, please explain \_\_\_\_\_

Are there other owners or stockholders?             Yes             No

List same information for additional principals and stockholders on separate page.

### Personal References

Please list two personal references that can vouch that you are of good character.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

### Daily Contact Person

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

## Accounts Receivable Information

Annual Sales \$ \_\_\_\_\_ Current Open Invoices \$ \_\_\_\_\_

Anticipated Monthly Factoring \$ \_\_\_\_\_ Number of Customers \_\_\_\_\_

Average number of days invoices are outstanding \_\_\_\_\_

Average invoice amount \$ \_\_\_\_\_

Are discounts or other sales incentives given?  Yes  No

If yes, explain \_\_\_\_\_

Are receivables, inventory or fix assets pledged as collateral for a loan?

Yes  No If yes, to whom? \_\_\_\_\_

Are all taxes current?  Yes  No

If no, how much is owing to whom? \_\_\_\_\_

Are there any tax liens, judgments, or suits pending against the company?

Yes  No If yes, explain \_\_\_\_\_

Are there any judgments, suits or adverse legal proceedings rendered against any principles or stockholders?  Yes  No

If yes, explain \_\_\_\_\_

## Bank Information

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Checking Account Number \_\_\_\_\_

Savings Account Number \_\_\_\_\_

## Support Information

Name of Accountant \_\_\_\_\_

Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number ( \_\_\_\_ ) \_\_\_\_\_

### Please Provide The Following With Application

\_\_\_\_ Articles of Incorporation or DBA papers.

\_\_\_\_ Copy of each owner's driver's license.

\_\_\_\_ Copy of business card.

\_\_\_\_ Voided copy of a check

\_\_\_\_ Most recent accounts receivable aging.

\_\_\_\_ Most recent accounts payable aging.

\_\_\_\_ Current customer list ( including name address phone & email )

I hereby certify the above information is correct to the best of my knowledge.

Please have all principals' sign below.

Signature \_\_\_\_\_

Print Name/Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name/Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name/Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name/Title \_\_\_\_\_

Date \_\_\_\_\_

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