

**(O) 361-241-6060**  
**(F) 361-241-9494**  
**(C) 361-960-2047**

**P.O. Box 260074**  
**Corpus Christi, Texas 78426**

[www.cashflowexperts.net](http://www.cashflowexperts.net)

## **Client Application**

**Company Legal Name** \_\_\_\_\_

**Trade Name (DBA)** \_\_\_\_\_

**Employer Identification Number (EIN)** \_\_\_\_\_

**Number of Employees** \_\_\_\_\_

**Present Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **County** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_ **Cell** \_\_\_\_\_

**E-mail Address** \_\_\_\_\_

**Type of Company:** Corporation \_\_\_\_\_; Partnership \_\_\_\_\_; Sole Proprietor \_\_\_\_\_; LLC \_\_\_\_\_

**State of Incorporation:** \_\_\_\_\_ **Date of Incorporation:** \_\_\_\_\_

**Outstanding Business Loans:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Bank Name:** \_\_\_\_\_

**Balance Due:** \_\_\_\_\_

**Are your Accounts Receivable pledged?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Outstanding Taxes:** \_\_\_\_\_ **Any Liens Filed?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Bankruptcy Filed?** Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, when?** \_\_\_\_\_ **Status of Bankruptcy?** \_\_\_\_\_

**Are your 941 Payroll Taxes Current?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Are your State Sales Taxes Current?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Principals (Owners) of Company** **Percentage Owned** \_\_\_\_\_

**Name and Title** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Telephone** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_ **Driver License** \_\_\_\_\_ **DOB** \_\_\_\_\_

**Spouse:** \_\_\_\_\_

**Drivers License Number** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**Name and Title** \_\_\_\_\_ **Percentage Owned** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Telephone** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_ **Driver License** \_\_\_\_\_ **DOB** \_\_\_\_\_

**Spouse:** \_\_\_\_\_

**Drivers License Number** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**Name and Title** \_\_\_\_\_ **Percentage Owned** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Telephone** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_ **Driver License** \_\_\_\_\_ **DOB** \_\_\_\_\_

**Spouse:** \_\_\_\_\_

**Drivers License Number** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

# Banking Information

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

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Bank Officer \_\_\_\_\_

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

Date Account Opened \_\_\_\_\_

## Company Sales and Receivables:

Monthly Sales Volume \_\_\_\_\_ Terms of Sale \_\_\_\_\_ Number of Clients \_\_\_\_\_

# Of Invoices per Month \_\_\_\_\_ Current A/R \_\_\_\_\_ Volume to Factor \_\_\_\_\_

### Four Largest Customers To Factor:

Name and Contact Information  
(Including email address if available)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

How did you hear of Cash Flow Experts? \_\_\_\_\_

Please provide the following ( where applicable)

1. Company Articles of Incorporation, Partnership Agreement, or Business License
2. Assumed Name Certificate (DBA Document)
3. Certificate of Insurance (Gen Liability and/ or Workers Comp) if required
4. Copy of all Principals and Spouses drivers licenses and Social Security Cards
5. Current Aging Report
6. Current Customer List

The foregoing information is true and correct to the best of my knowledge. I hereby authorize Cash Flow Experts, Inc. (CFE) or its independent funding sources the right to verify and investigate any and all of the foregoing statements, including, but not limited to, my/our creditworthiness and financial responsibility.

Signed \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_