

ADVANCE  FINANCIAL
CORPORATION

Financing Small Business Growth Since 1976

3700 Mansell Road Suite 550 Alpharetta, Georgia 30022

Phone (404) 256-2123 Fax (404) 250-0205

Application Date: Credit Line Requested

Referred By:

Company Federal Tax ID Number:

Legal Company Name: Phone:

HQ Address: City:

County: State: Zip:

Other Address: City:

County: State: Zip:

Date of Incorporation: County: State:

List complete name of any Affiliate, Subsidiary, Holding Company or Parent Corporation:

Accountant: Name:

Address: City:

State: Zip: Phone:

Company Shareholders/Officers (For LLC, please list manager(s) and majority members).

President's Name:

Address: City:

SSN: State: Phone:

Secretary's Name:

Address: City:

SSN: State: Phone:

Shareholders Name: %Stake: *

Shareholders Name: %Stake: *

Shareholders Name: %Stake: *

Please indicate via check boxes those authorized to sign for the corporation with AFC.

Credit Information (Banks and Other Creditors)

Primary Bank: _____ Phone: _____
Address: _____
City: _____ State: _____ Officer: _____

Please list large customers that do not show up on your current A/R aging.

Company: _____ City: _____
State: _____ Contact: _____ Phone: _____
Company: _____ City: _____
State: _____ Contact: _____ Phone: _____

General Information: (Check All that Apply)

- Liens and/or Financing Statements outstanding on A/R and/or Inventory of Applicant.
- Litigation pending against Applicant.
- Presence of outstanding judgments against Applicant.
- Presence of outstanding Federal and/or State Tax liens against Applicant.
- Any history of Bankruptcy for Shareholders or Officers.

Applicant Understands that Advance Financial Corporation intends to rely on the information provided in determining whether or not to enter into a financing relationship.

Applicant hereby authorizes Advance Financial Corporation, or any of its employees to examine its books and records, to discuss the affairs, accounts and finances of the Applicant with Applicant's officers and employees.

Applicant hereby authorizes AFC or any of its employees to investigate the personal credit history of shareholders, officers and Authorized Signers.

Applicant hereby authorizes its Bank, suppliers, customers, accountants, attorneys and employees to provide AFC any information about Applicant and its affairs, finances and accounts as AFC or its employees may request. A copy of this authorization may be accepted as if it were an original.

Applicant: _____
By: _____
Its: _____

Checklist of Additional Information Required for Underwriting:

- Financial Statements (Two-FYE Statements, if available, plus most recent interim statement)
- Accounts Receivable Aging (Open Item)
- Accounts Payable Aging
- Personal Financial Statements (Principals)
- Sample transaction (Copy of invoice with bill of lading/shippers manifest, customers P.O., etc.)

Checklist of Additional Information Required for Documentation and Funding:

- Customer List with Address and phone number
- Articles of Incorporation or Formation of LLC
- Corporate Minutes showing Election of Officers or Operating Agreement for LLC