



Application for Financing

Part 1 – Business Financing Application

This section collects information about the business entity applying for financing.

Business Name	
DBA / Franchise Name	
Store #	
Business Address	
Telephone / Fax	
Date Opened / Years Under Current Ownership	
Company Website	

Type of Organization: Sole Proprietor Corporation Partnership LLC/Partnership

Owners / Officers / Partners / Guarantors (up to 4)

Name	% Owned	Home Address	Title	US Citizen (Y / N)	SSN	Email	Cell Phone #
				<input type="checkbox"/> Y <input type="checkbox"/> N			
				<input type="checkbox"/> Y <input type="checkbox"/> N			
				<input type="checkbox"/> Y <input type="checkbox"/> N			
				<input type="checkbox"/> Y <input type="checkbox"/> N			

*Note: Each principal owning 20% or more must fill out and sign an application

Store / Unit Information

Store Address	
Unit Type	
Opening Date	
Lease Info	
Landlord Info	

Bank Name	
Account #	
Contact Name	
Phone #	

Purpose of Financing: Acquisition Refinance Remodel Equipment Only

Part 2 – Personal Financial Statement

This section provides personal financial details of owners/guarantors.

Name	
Address	
City / State / Zip	
SSN	
Home Phone	
Email	

Note: If there are multiple Owners, Officers, Partners and/or Guarantors, please fill out a personal financial section for each individual that owns 20% or more of the company.

Assets & Liabilities (check I = Individual, J = Joint)

Asset	Amount	I	J	Liabilities	Amount	I	J
Cash, Checking, Savings		<input type="checkbox"/>	<input type="checkbox"/>	Notes Payable		<input type="checkbox"/>	<input type="checkbox"/>
Marketable Securities		<input type="checkbox"/>	<input type="checkbox"/>	Accounts Payable		<input type="checkbox"/>	<input type="checkbox"/>
Non-marketable Securities		<input type="checkbox"/>	<input type="checkbox"/>	Taxes Payable		<input type="checkbox"/>	<input type="checkbox"/>
Real Estate		<input type="checkbox"/>	<input type="checkbox"/>	Mortgages		<input type="checkbox"/>	<input type="checkbox"/>
Automobiles		<input type="checkbox"/>	<input type="checkbox"/>	Term Loans		<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance Cash Value		<input type="checkbox"/>	<input type="checkbox"/>	Student Debt		<input type="checkbox"/>	<input type="checkbox"/>
Other Assets		<input type="checkbox"/>	<input type="checkbox"/>	Other Debt		<input type="checkbox"/>	<input type="checkbox"/>
Total Assets				Total Liabilities			
Net Worth (Assets - Liabilities)							

Annual Income & Expenditures

Category	Amount	Individual	Joint
Salary / Bonus		<input type="checkbox"/>	<input type="checkbox"/>
Dividends & Interest		<input type="checkbox"/>	<input type="checkbox"/>
Real Estate Income		<input type="checkbox"/>	<input type="checkbox"/>
Other Income		<input type="checkbox"/>	<input type="checkbox"/>

Total Expenditures (Annual): _____

Declarations

Declarations	Yes	No
Have you or any firm you owned declared bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a defendant in any suit or legal action?	<input type="checkbox"/>	<input type="checkbox"/>
Are you presently subject to any judgments or tax liens?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been audited by the IRS?	<input type="checkbox"/>	<input type="checkbox"/>

Signatures

Signature (Individual): _____ Date: _____

Signature (Other Party): _____ Date: _____

By completing and signing this application, you hereby authorize Franchise Loans Direct, LLC., its agents or assignees, to investigate your credit for the purpose of issuing, updating, renewing or offering extensions of credit to the applicant or the collection of any resultant accounts. You also authorize Franchise Loans Direct, LLC and/or its assignees to obtain personal credit report(s) on all Principal(s) and authorize the release of bank and financial information necessary to complete this credit investigation. You also warrant that the information provided above is true and accurate. A photocopy, digital scan or fax of this authorization shall be valid as the original. You have rights with respect to this credit application. If a credit application is denied, the applicant has the right to receive a written statement outlining the specific reasons for the denial. To obtain this statement, you must write to Franchise Loans Direct, LLC, 8062 Wilfredo Court, Naples, FL 34419 Your request must be received within 60 days from the date you are notified of our decision. We will respond within 30 days of receipt of your request with a written statement.

We Are an Equal Opportunity Creditor

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, creed, color, religion, national origin, marital status or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant's income derives from public assistance programs or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580

Schedule A – Cash, Bank Accounts, Notes & Mortgages Receivable

Institution	Type	Owner	If Pledged	Balance

*If more space is needed attach a separate sheet.

Schedule B – Marketable Securities

#Shares	Description	In Name Of	RegY	RegN	Value	Exchange

*If more space is needed attach a separate sheet.

Schedule C – Non-Marketable Securities

#Shares	Description	In Name Of	RegY	RegN	Value	Method

*If more space is needed attach a separate sheet.

Schedule D – Real Estate

Description	Date	%	Value	Balance	Payment	Maturity	Mortgagee

*If more space is needed attach a separate sheet.

Schedule E – Life Insurance

Insurer	Owner	Beneficiary	Face	Loans	CSV

Schedule G – Businesses Owned

Business	Position	Line	Years	Assets	%	Net Value

* If more space is needed attach a separate sheet.