

Keystone Logo Here **CONFIDENTIAL FACTORING APPLICATION**

Phone: 877-221-2880 Fax: 727-231-8788 Email: application@KeystoneFactoring.com

- Funding decisions based on your customers' financial strength, not yours
- Unlimited funding; there is no maximum credit limit placed on your company
- No hidden fees
- Funds wired to your account in 24 hours

BUSINESS INFORMATION

Company Name: _____ DBA: _____
Street Address: _____ Apt./Suite: _____
City: _____ State: _____ County: _____ Zip Code: _____
Business Phone: _____ Business Fax: _____
Email Address: _____ Website URL: _____
Date Formed: _____ Sate of Formation: _____ Federal Tax I.D.: _____
Entity Type: C Corporation S Corporation Partnership LLC Sole Proprietor
Business Description: _____
How did you hear about Keystone Capital Funding?: _____

PERSONAL INFORMATION

First Name: _____ Last Name _____ Title: _____
% Ownership: _____ Home Street : _____
City: _____ State: _____ Zip: _____
Phone: () _____ Cell: () _____
Fax: () _____ Email Address: _____
Date of Birth: _____ Social Security Number: _____

OTHER OWNERS/PARTNERS

First Name: _____ Last Name _____ Title: _____
% Ownership: _____ Home Street : _____
City: _____ State: _____ Zip: _____
Phone: () _____ Cell: () _____
Fax: () _____ Email Address: _____
Date of Birth: _____ Social Security Number: _____

If there are additional owners/partners, please list on separate page and send via email to application@KeystoneFactoring.com or fax to 727-231-8788.

DOLLAR AMOUNTS OF A/R NOW OPEN

Total Outstanding: \$ _____ *If you are a start-up business
1-30 days old: \$ _____ just put \$0 in the table
31-60 days old: \$ _____
61-90 days old: \$ _____
91+ days old: \$ _____

If available, please email Current A/R Aging Report to application@KeystoneFactoring.com or fax to 727-231-8788

GENNERAL INFORMATION

Annual Sales _____ Avg. Monthly Sales _____
Average Gross Profit% _____ # Active Customers _____
Avg. Invoice Size _____ Monthly Amt. to be Factored _____
Largest Customer _____ % of Business _____

Have you ever factored before? YES NO
 If yes, with whom? _____ When? _____
 Are you currently factoring? YES NO
 If yes, with whom? _____ Contract End Date: _____
 Do you currently have a loan or line of credit for the business? YES NO
 Are any of your receivables pledged as collateral? YES NO
 Have you ever filed for personal or corporate bankruptcy? YES NO
 Any Federal, State, or Payroll taxes past due? YES NO
 Are there any judgments pending by or against the company? YES NO
 Is there any pending or threatened litigation against the company? YES NO
 Do you process your own payroll? YES NO
 Have any of the Principals (I.E., directors, officers, shareholders, partners, members) been involved in a business similar to that of applicant within the last 5 years? YES NO

FOUR LARGEST ACCOUNTS TO BE FACTORED

Information is for credit research only. Your customers will NOT be contacted by us.

Customer #1 Name: _____
 Street Address: _____ Apt./Suite _____
 City: _____ State: _____ Zip: _____
 Average Monthly Sales to this customer: \$ _____ % of Total Business _____
 Avg. time it takes to get paid (in days): _____ Credit line desired for this customer: \$ _____

Customer #2 Name: _____
 Street Address: _____ Apt./Suite _____
 City: _____ State: _____ Zip: _____
 Average Monthly Sales to this customer: \$ _____ % of Total Business _____
 Avg. time it takes to get paid (in days): _____ Credit line desired for this customer: \$ _____

Customer #3 Name: _____
 Street Address: _____ Apt./Suite _____
 City: _____ State: _____ Zip: _____
 Average Monthly Sales to this customer: \$ _____ % of Total Business _____
 Avg. time it takes to get paid (in days): _____ Credit line desired for this customer: \$ _____

Customer #4 Name: _____
 Street Address: _____ Apt./Suite _____
 City: _____ State: _____ Zip: _____
 Average Monthly Sales to this customer: \$ _____ % of Total Business _____
 Avg. time it takes to get paid (in days): _____ Credit line desired for this customer: \$ _____

I hereby subscribe and affirm that all the information provided is true and accurate. Keystone Capital Funding, LLC is authorized (as deemed necessary) to verify the accuracy of the statements and information provided and to conduct a credit investigation and background (including criminal) check, including without limitation, obtaining one or more credit reports from credit bureaus. Any adverse material change to the financial condition previously supplied must be reported within fifteen (15) days.

Signature: _____ Title: _____
 Date: _____ % Ownership _____

Please fax application and A/R aging report (if available) to Keystone Capital Funding at: 727-231-8788 or email to application@KeystoneFactoring.com If you have any questions, please call us toll free at: 877-221-2880.