



APPLICATION FOR ACCOUNTS RECEIVABLE FACTORING
Fax to: (801) 566-7458

Application Date: ___/___/___ Date Company Established: ___/___/___

Company Information

Organization Type: [] Proprietorship [] Partnership [] Corporation State: _____

Company/Individual Name: _____

Fictitious Business Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ - _____ Fax: () _____ - _____ Fed Tax ID or SSN: _____

Line of Business (Describe): _____

Business Category: [] Service [] Wholesale [] Manufacturing Est Monthly Factoring Volume: \$ _____

Number of Employees: _____ Number of Independent Contractors: _____ Last 941 Filing ___/___/___

Est Avg Receivable Turnover _____ Days Avg Invoice Amount: \$ _____ Avg No of Invoices/Mo _____

Have you factored in the past? (Y/N): ___ When: _____ Company _____

Any UCC's on file with A/R as Collateral? (Y/N): ___ Company: _____

Any Tax Liens on file? (Y/N): ___ Amount: \$ _____ Installment Agreement (Y/N): _____

Attorney: _____ Phone: () _____ - _____

Accountant: _____ Phone: () _____ - _____

Banking Information

Bank: _____ Account Name: _____

Account Number: _____ ABA/Routing No. (9 Digits): _____

Address: _____ City: _____ State: _____ Zip: _____

Information about the Principals

[] CEO/Pres: Name: _____ Address: _____

[] Proprietor: City: _____ State: _____ Zip: _____ Phone: _____

[] Partner: Birthdate: ___/___/___ SSN: ___-___-___ Drivers License: _____

[] CFO/V.P.: Name: _____ Address: _____

[] Secretary: City: _____ State: _____ Zip: _____ Phone: _____

[] Partner: Birthdate: ___/___/___ SSN: ___-___-___ Drivers License: _____

(Signature)

(Print/Type Name)

(Title/Position)

(Signature)

(Print/Type Name)

(Title/Position)

By signing above, the individual as principle of and/or, guarantor for the credit applicant authorizes Omni Funding, its designee, assigns or potential assigns, the use of consumer credit reports in considering this application, and from time to time as may be needed to: update, renewal, or extension of applicant credit, and for the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as the original.