

Required Documentation for New Client

In order for us to complete your file as you requested, the following is needed by International Trade Finance to determine the feasibility of entering into a purchase order finance or accounts receivable factoring program:

- () Complete & Signed App / Request for Bank Credit Info / Request for Lease Info (if applicable)
- () Customer Questionnaire (if submitted through a broker) / Project Analysis (if manufacturer)
- () Copy of Valid Principals' Drivers' Licenses
Copy of Valid Company Business License (if applicable to State)
- () Articles of Incorporation / Articles of Organization /
Sole Proprietorship Fictitious Business Filing
- () Corporate By-Laws / LLC Operating Agreement
- () Certified Financial Statements (last 6 months)
Company Tax Returns (last 2 years), Form 941 filing (if applicable)
- () Accounts Receivable and Accounts Payable Aging Report
- () Copy of End Buyers' Purchase Orders and/or Contracts for financing
--- Assignment of Letter of Credit (if applicable)
- () Copy of Suppliers' Quotes and/or (ProForma) Invoices
(not applicable for accounts receivable factoring)

*Upon completion of the above, the following documentation
will be forwarded to you for your review and signature:*

- () Proposal of Terms
- () Security Agreement and Annex
- () Personal Guaranty (NOTARY REQUIRED)
- () Corporate Resolution to Execute Contract
- () ITF will file a UCC-1 Financing Statement listing the company and the main principal as debtors
- () ITF may require a copy of Company's Product Liability Insurance
naming International Trade Finance as Beneficiary

International Trade Finance, LLC.
220 Avenue "I"
Redondo Beach, California 90277
V: 310/316-1884 * F: 310/316-9384

Application to Enter into a Security Agreement

- 1 Business Name: _____ Phone: ()- _____
- 2 Street Address: _____ Fax: ()- _____
- 3 City: _____ State: _____ Zip: _____ County: _____
- 4 Date Established: _____ Does company own real property? Yes No
- 5 If doing business in more than one place, list additional addresses: _____
- _____
- 6 Type of Business: _____
- _____
- 7 Email addresses: _____

PRINCIPALS

- 8 **PRESIDENT** Name: _____ Driver's License No: _____
 SOLE PROPRIETOR Home Street Address: _____ Own
 SENIOR PARTNER Home Street Address: _____ Rent
_____ % OWNED City, State, Zip Code: _____
Home Tel.: ()- _____ SS No.: _____ DOB: _____
- 9 **SECRETARY** Name: _____ Driver's License No: _____
 OTHER PARTNER Home Street Address: _____ Own
_____ % OWNED Home Street Address: _____ Rent
City, State, Zip Code: _____
Home Tel.: ()- _____ SS No.: _____ DOB: _____
- 10 **OTHER OFFICER** Name: _____ Driver's License No: _____
 SHAREHOLDER Home Street Address: _____ Own
 PARTNER Home Street Address: _____ Rent
_____ % OWNED City, State, Zip Code: _____
Home Tel.: ()- _____ SS No.: _____ DOB: _____
- 11 **OTHER OFFICER** Name: _____ Driver's License No: _____
 SHAREHOLDER Home Street Address: _____ Own
 PARTNER Home Street Address: _____ Rent
_____ % OWNED City, State, Zip Code: _____
Home Tel.: ()- _____ SS No.: _____ DOB: _____

SUPPORT INFORMATION

12 Name of Accountant: _____ Firm: _____ Phone: ()-_____

Street Address: _____ City, State, Zip: _____

13 Name of Attorney: _____ Firm: _____ Phone: ()-_____

Street Address: _____ City, State, Zip: _____

14 Name of Insurance Agt.: _____ Firm: _____ Phone: ()-_____

Street Address: _____ City, State, Zip: _____

TAX INFORMATION

15 Federal ID Number: _____ Number of Employees: _____

16 How often do you file 941 Payroll Taxes? Weekly Monthly Quarterly Yearly

17 Do you have Federal or State Taxes past due? Yes No If "yes", has lien been filed? Yes No

18 If "yes" to #17, please list type, quarter/year, and amounts: _____

BANKING INFORMATION

BUSINESS CHECKING ACCOUNT

19 Name of Bank: _____ Date Account Opened: _____

20 Street Address: _____ City, State, Zip _____

21 Account No.: _____ Name of Bank Officer: _____ Phone: ()-_____

BUSINESS LOAN ACCOUNT

22 Name of Financial Institution: _____ Phone: ()-_____

23 Street Address: _____ City, State, Zip: _____

24 How long with Institution: _____ Loan Amount: _____ Collateral: _____

PERSONAL ACCOUNT OF:

President

Proprietor

Partner

25 Name of Bank: _____ Date Account Opened: _____

26 Street Address: _____ City, State, Zip: _____

27 Account No.: _____ Name of Bank Officer: _____ Phone: ()-_____

OPERATIONS INFORMATION

- 28 Are you presently leasing your business space? _____ Period of Present Lease: _____
- 29 Name of Landlord and/or Management Company: _____
- 30 Street Address: _____ City, State, Zip: _____
- 31 Phone: () - _____ Monthly Rental Amount: _____

RECEIVABLE INFORMATION

- 32 Dollar Amount of Receivable Now Open: _____ Avg. Monthly Sales: _____
- 33 Approximate Number of Customers: _____ Terms of Sales: _____
- 34 Are you currently factoring your receivables? Yes No If "yes," w/ whom? _____
- 35 Are your receivables pledged as collateral? Yes No If "yes," to whom? _____
- 36 Other Commercial Loans/Leases Outstanding? Yes No If "yes," list on back of this application.

I/We have been told and do understand that the submission of an application for financing with International Trade Finance (herein after "ITF") does not mean that ITF will provide any financial services whatsoever.

I/We further have been told and do understand that approval for finance may come only after ITF approves said application and the Purchase Orders offered are approved according to the terms of ITF's Security Agreement.

The above Statements are true and accurate to the best of my information and belief. This serves as my permission for release of any information regarding this application for the purposes of credit investigation to ITF.

Signed: _____ Print Name & Title: _____ Dated: _____

Signed: _____ Print Name & Title: _____ Dated: _____

Signed: _____ Print Name & Title: _____ Dated: _____

Signed: _____ Print Name & Title: _____ Dated: _____

PLEASE ACCEPT THE SIGNATURE(S) ABOVE AS AUTHORIZATION TO RELEASE ANY CREDIT REPORTS OR CHECKING ACCOUNT INFORMATION ON EITHER THE BUSINESS NAME OR INDIVIDUAL NAME(S) AS LISTED UNDER THE SECTION ENTITLED "PRINCIPALS" TO:

INTERNATIONAL TRADE FINANCE, LLC.
c/o Riviera Finance - Chicago Central
17W415 Roosevelt Road
Oakbrook Terrace, Illinois 60181-9824
Tel: (630) 627-8750 * Fax: (630) 627-0399

Thanking you in advance for your cooperation.

International Trade Finance, LLC.
220 Avenue "I"
Redondo Beach, California 90277
Tel: (310) 316-1884 Fax: (310) 316-9384

**REQUEST FOR
BANK CREDIT INFORMATION**

TO: _____

Date: _____

Please accept this letter as written authorization to release all checking information on both my business and personal accounts to the following company:

International Trade Finance, LLC.
220 Avenue "I"
Redondo Beach, California 90277
Tel: (310) 316-1884 Fax: (310) 316-9384

Thank you for your cooperation and prompt attention in replying to this request for information.

Sincerely,

Authorized Signature and Title

Company Name

TO: BANK CREDIT DEPARTMENT

RE: _____

BUSINESS ACCOUNT # _____
PERSONAL ACCOUNT # _____

The above account has given the name of your bank as a reference in applying for credit.
Thank you for completing the information below and returning the completed form to ITF at your earliest convenience.

BUSINESS DEPOSIT ACCOUNT

Date opened: _____

Date opened: _____

Average Balance: _____
(low, medium, high)
(three, four, five, six figures) _____

Average Balance: _____
(low, medium, high)
(three, four, five, six figures) _____

Deposit Account Satisfactory? Yes () No ()

Deposit Account Satisfactory? Yes () No ()

BUSINESS LOAN ACCOUNT

Original Amount _____ Balance _____

Original Amount _____ Balance _____

Collateral _____

Collateral _____

Payments Current? Yes () No ()

Payments Current? Yes () No ()

Rating _____

Rating _____

Signature of Bank Representative

Title

Date

**REQUEST FOR
LEASE INFORMATION**

Date: _____

TO: _____

Please accept this letter as written authorization to release any lease-related information on my business to the following company:

International Trade Finance, LLC.
220 Avenue "I"
Redondo Beach, California 90277
Tel: (310) 316-1884 Fax: (310) 316-9384

Thank you for your cooperation and prompt attention in replying to this request for information.

Sincerely,

Authorized Signature and Title

Company Name

TO: LANDLORD and/or MANAGEMENT COMPANY

RE: _____

The above lessee has given your name as a reference in applying for credit.
Thank you for completing the information below and returning the completed form to ITF at your earliest convenience.

PRESENT LEASE

Period of Present Lease _____

Monthly Rental Amount _____

Payments Current? Yes () No ()

History of Late Payments? Yes () No () If "yes", please make appropriate comments below.

Please make any additional comments that will assist in our credit assessment. Thank you for your cooperation.

Sign and Print Name

Title

Date