



| GENERAL INFORMATION | | | |
|------------------------|-----------------------|-----------------------|------------------------|
| STREET ADDRESS | CITY | STATE | ZIP |
| COMPANY NAME | PHONE NUMBER | FAX | |
| MAILING ADDRESS | CITY | STATE | ZIP |
| PRIMARY CONTACT | PRIMARY CONTACT PHONE | PRIMARY CONTACT EMAIL | |
| M.C. NUMBER | D.O.T. NUMBER | FEDERAL I.D. NUMBER | STATE OF INCORPORATION |
| NUMBER OF TRUCKS OWNED | TYPES OF LOADS HAULED | LOCAL OR NATION-WIDE | |

| OWNERSHIP INFORMATION | | | | |
|-----------------------|-------------|-------|------------------------|------------|
| OFFICER/PARTNER NAME | % OWNERSHIP | TITLE | SOCIAL SECURITY NUMBER | |
| HOME ADDRESS | CITY | STATE | ZIP | HOME PHONE |
| OFFICER/PARTNER NAME | % OWNERSHIP | TITLE | SOCIAL SECURITY NUMBER | |
| HOME ADDRESS | CITY | STATE | ZIP | HOME PHONE |

| PROFESSIONAL SERVICES INFORMATION | | | | |
|-----------------------------------|---------------|-------|--------------|----------------|
| BANK NAME | CONTACT NAME | TITLE | PHONE NUMBER | LOANS (YES/NO) |
| ATTORNEY | COMPANY/ FIRM | | PHONE NUMBER | |
| ACCOUNTANT | COMPANY/ FIRM | | PHONE NUMBER | |

| ACCOUNTS RECEIVABLE INFORMATION | | | |
|---------------------------------|-----------------------|------------------------|-------------------------------|
| INVOICE TERMS | AVG. INVOICES / MONTH | AVG. INVOICE SIZE (\$) | PROJECTED MONTHLY VOLUME (\$) |

ARE YOU CURRENTLY FACTORING? YES NO IF SO, WITH WHOM? _____

ARE THERE ANY ANY IRS LIENS OR PAST DUE IRS OBLIGATIONS? YES NO IF YES, IS THERE A PAYMENT PLAN / SUBORDINATION CURRENTLY IN PLACE? YES NO

DO YOU ACCEPT CREDIT CARD PAYMENTS FROM CUSTOMERS? YES NO DO YOU USE SUBHAULERS? YES NO

I/WE HEREBY APPLY FOR THE CREDIT DESCRIBED IN THIS APPLICATION ON BEHALF OF THE APPLICANT BUSINESS. I/WE CERTIFY THAT I/WE MADE NO MISREPRESENTATION IN THIS APPLICATION OR IN ANY RELATED DOCUMENTS, THAT ALL INFORMATION IS TRUE AND COMPLETE, AND THAT I/WE DID NOT OMIT ANY IMPORTANT INFORMATION. I/WE AGREE THAT ANY PROPERTY SECURING THE CREDIT WILL NOT BE USED FOR ANY ILLEGAL PURPOSE. SWORD GATE CAPITAL, LLC ("SGC") IS AUTHORIZED TO VERIFY WITH OTHER PARTIES AND TO MAKE ANY INVESTIGATION OF MY/OUR CREDIT, EITHER DIRECTLY OR THROUGH ANY AGENCY EMPLOYED BY SGC FOR THAT PURPOSE. SGC MAY DISCLOSE TO ANY OTHER INTERESTED PARTIES INFORMATION AS TO SGC'S EXPERIENCE OR TRANSACTIONS WITH MY/OUR ACCOUNT. I/WE UNDERSTAND THAT SGC WILL RETAIN THIS APPLICATION AND ANY OTHER CREDIT INFORMATION SGC RECEIVES, EVEN IF NO CREDIT IS GRANTED. THESE REPRESENTATIONS AND AUTHORIZATIONS EXTEND NOT ONLY TO SGC, BUT ALSO TO ANY INSURER OF THE CREDIT AND TO ANY INVESTOR TO WHOM SGC MAY SELL ALL OR PART OF THE CREDIT. I/WE FURTHER AUTHORIZE SGC TO PROVIDE ANY SUCH INSURER OR INVESTOR ANY INFORMATION AND DOCUMENTATION THAT THEY MAY REQUEST WITH RESPECT TO MY/OUR APPLICATION OR CREDIT.

AUTHORIZATION SIGNATURES OF EACH OWNER/APPLICANT

| SIGNATURE | PRINTED NAME | TITLE | DATE |
|-----------|--------------|-------|------|
| | | | |
| | | | |

DOCUMENT CHECKLIST

PLEASE SUBMIT THE FOLLOWING DOCUMENTATION WITH YOUR COMPLETED APPLICATION:

- TAX RETURN FOR PRIOR TWO YEARS (MOST CURRENT FOR NEW BUSINESS)
- BILL OF LADING & RATE CONFIRMATION (WITH EACH INVOICE SUBMITTED)
- FOR FACTORING) COPY OF DRIVERS LICENSE
- W9 TAX FORM WITH EIN & VOIDED CHECK

