



1st Financial Factoring
Get Funded
Express Application

Please complete the following application and one of our representatives will contact you promptly to discuss your business needs. Soon after, we will send you via e-mail or fax a customized proposal for your consideration and acceptance. There is absolutely no obligation.

Bold indicates required fields

* Company Name	<input type="text"/>		
* Contact Person	<input type="text"/>	Title	<input type="text"/>
* Phone	<input type="text"/>	Fax	<input type="text"/>
Cellular Phone	<input type="text"/>	State of Incorporation	Select State <input type="text"/>
Address	<input type="text"/>	City	<input type="text"/>
State	Select State <input type="text"/>	Zip Code	<input type="text"/>
Country	Select Country <input type="text"/>		
E-mail	<input type="text"/>	Company Structure	Select One <input type="text"/>
How soon do you need to get funded?			<input type="text"/>
Any Federal or State Taxes Past Due?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, type amount:			<input type="text"/>
Do you have a lien filed?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, briefly describe:			<input type="text"/>
Do you have any loans where you pledge your receivables as collateral?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, to whom?			<input type="text"/>
Dollar Amount of Receivables Now Open (Approx):			<input type="text"/>
Dollar Amount of Open Receivables 1-30 Days (Approx):			<input type="text"/>

FAX:

Dollar Amount of Open Receivables 31-60 Days (Approx):	<input type="text"/>
Dollar Amount of Open Receivables 61-90 Days (Approx):	<input type="text"/>
Anticipated monthly factoring volume (Approx):	<input type="text"/>
Do you want to factor existing receivables?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, how much?	<input type="text"/>
Please describe what your company does:	
<div style="border: 1px solid gray; height: 100px; width: 100%;"></div>	

FAX: