

NORTHWEST FINANCE

Confidential Client Information Sheet

BUSINESS INFORMATION

Legal/Corporate Name:	DBA:		
Physical Address:	City:	State:	Zip:
Telephone #:	Fax #:	Federal Tax ID:	
Date Business Started:	Length of Ownership:	Website:	
Type of Entity (check one): Sole Proprietorship Partnership Corporation LLC Other	Email Address:		
Type of Business (check all that apply): Retail Manufacturing Wholesale Restaurant Construction Other	Product/Service Sold:		

MERCHANT- BUSINESS /OWNER INFORMATION

Corporate Officer/Owner Name:	Title:	Ownership %:	
Home Address:	City:	State:	Zip:
SSN:	Date of Birth:	Home #:	Cell #:

PARTNER INFORMATION

Partner Name:	Title:	Ownership %:	
Home Address:	City:	State:	Zip:
SSN:	Date of Birth:	Home #:	Cell #:

BUSINESS PROPERTY INFORMATION

Business Landlord or Mortgage Bank:	Contact Name and/or Account #:	Phone #:	Monthly Rent:
-------------------------------------	--------------------------------	----------	---------------

BUSINESS TRADE REFERENCES (Please list at least 3 trade suppliers. Please attach any additional references on a separate page.)

Business Name:	Contact Name and/or Account #:	Phone #:
Business Name:	Contact Name and/or Account #:	Phone #:
Business Name:	Contact Name and/or Account #:	Phone #:

Applicant authorizes NW Finance Inc. and its assigns, agents, banks or financial institutions to obtain an investigative or consumer report from a credit bureau or a credit agency and to investigate the references given on any other statement or data obtained from applicant.

Applicant's Signature

Date

Applicant's Signature

Date

Please email it back and have ready if needed your last three months of bank statements and or Invoices for completed work for Invoice Finance transaction **612-615-8196 Email:**

info@businessinvoicefinancing.com