



**Application**

**Legal Name of Business/Company:** \_\_\_\_\_

DBA (Trade Style): \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Web Address: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Additional locations: \_\_\_\_\_

Have you changed business locations within the past 5 years? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Prior Address: \_\_\_\_\_

State of Incorporation/Organization: \_\_\_\_\_ Corporation \_\_\_\_\_ LLC \_\_\_\_\_ Other: \_\_\_\_\_

Type of Business: Manufacturing \_\_\_\_\_ Importer \_\_\_\_\_ Distributor/Wholesale \_\_\_\_\_ Service \_\_\_\_\_

Type of Product: \_\_\_\_\_ Annual Sales last 12 mos. \_\_\_\_\_

***Checklist***

- \_\_\_ Corporate Financial Statements OR Tax Returns (Last 2 fiscal years if available)
- \_\_\_ Accounts Receivable Aging and Accounts Payable Aging (Both Agings as of same date)
- \_\_\_ Personal Financial statement on all officers and/or guarantors/shareholders
- \_\_\_ Copy of driver's license and/or other identifying document for US Patriot Act

**Shareholders/Officers/Partners/Owners:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Owner: Yes \_\_\_\_\_ No \_\_\_\_\_ % \_\_\_\_\_

Residence: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Own/Rent: \_\_\_\_\_ Phone: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Owner: Yes \_\_\_\_\_ No \_\_\_\_\_ % \_\_\_\_\_

Residence: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Own/Rent: \_\_\_\_\_ Phone: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Owner: Yes \_\_\_\_\_ No \_\_\_\_\_ % \_\_\_\_\_

Residence: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Own/Rent: \_\_\_\_\_ Phone: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ DOB: \_\_\_\_\_

\* List additional shareholders/officers/partners/owners info on additional page if needed.

**Name of Accountant:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: Zip: \_\_\_\_\_

**Taxes:**

Federal Tax ID #: \_\_\_\_\_ Are Taxes Current (Payroll, Income, State, County and City)?: Yes \_\_\_\_\_ No \_\_\_\_\_

If No, please explain past due balances.

**Business Bank Account:**

Bank Name: \_\_\_\_\_ Checking Acct. No.: \_\_\_\_\_ Balance: \$ \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Current Factor or Lender:**

Name of Factor: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

May we contact your current lender? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any other open loans with other lenders? Yes \_\_\_\_\_ No \_\_\_\_\_

Type of Collateral: \_\_\_\_\_ Guarantees (Personal/Corporate): \_\_\_\_\_

**Lawsuits & Judgments:**

Is the applicant or any officer, director or owner, a party in any lawsuit, whether as plaintiff or defendant?  
Yes \_\_\_ No \_\_\_ If yes, please provide details including copies of pleadings

Are there, or have there been any liens or judgments against the applicant or any of its officers, directors or owners?  
Yes \_\_\_ No \_\_\_ If yes, please provide details, including copies of liens and judgments.

Have any officers, directors or owners been charged or convicted of a crime other than traffic infractions?  
Yes \_\_\_ No \_\_\_ If yes, please provide details, including copies of court records.

Has the company been sold or has the shareholding changed within the past 24 months?  
Yes \_\_\_ No \_\_\_ If yes, please provide details.

**BY EXECUTING THIS APPLICATION, THE APPLICANT CERTIFIES TO THE FOLLOWING:**

*The information set forth in this application and the documents, schedules, reports, statements, and other information provided to Ocean Capital Lending, LLC with or pursuant to this application, are full, true, correct, complete and accurately reflect such information on the date(s) thereof; and Ocean Capital Lending, LLC is authorized to request, receive, and verify credit reports and other financial information regarding applicant including individuals who have signed below and its business that Ocean Capital Lending, LLC deems necessary or appropriate, and Ocean Capital Lending, LLC is authorized to inquire of, investigate, confirm, and verify any information contained in this application, in any documents, schedules, reports, statements and other information provided under or pursuant to this application, or learned by Ocean Capital Lending, LLC as part of its investigation and review of this application, applicant, or applicant's business and to file the appropriate financing statements pursuant to the Uniform Commercial Code.*

**IMPORTANT INFORMATION REGARDING THE USA PATRIOT ACT (SECTION 326)**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain and verify information, and maintain records that identify each person who opens an account. To this end, please provide a copy of a driver's license or another identifying document along with this application.

**Signed Individually and with Title:**

|                          |                     |               |   |
|--------------------------|---------------------|---------------|---|
| _____<br>Signature/Title | _____<br>Print Name | _____<br>Date | _____<br>Initial<br><b>We intend to apply for joint credit:</b> |
| _____<br>Signature/Title | _____<br>Print Name | _____<br>Date | _____<br>Initial  |
| _____<br>Signature/Title | _____<br>Print Name | _____<br>Date |   |

**EQUAL CREDIT OPPORTUNITY NOTICE**

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act, the federal agency that administers compliance with this law concerning this creditor is: DIVISION OF COMPLIANCE AND CONSUMER AFFAIRS, FEDERAL DEPOSIT INSURANCE CORPORATION, 500 WEST MONROE STREET, STE 3300, CHICAGO, IL 60661

**USA PATRIOT ACT COMPLIANCE**

The undersigned ("Applicants") are applying for a loan from Ocean Capital Lending, LLC

The applicants are:

\_\_\_\_ individuals  
\_\_\_\_ a partnership \_\_\_\_ LLP \_\_\_\_ LP \_\_\_\_ GP  
\_\_\_\_ a corporation \_\_\_\_ LLC  
\_\_\_\_ other \_\_\_\_\_

To comply with the requirements of Section 312 of the USA PATRIOT ACT, you must complete the following.

Applicants \_\_\_\_ **are** or \_\_\_\_ **are not** a "foreign financial institution", or acting on behalf of a "foreign financial institution", as that term is defined in the Bank Secrecy Act.

For individuals or sole proprietorships:

Applicants \_\_\_\_ **are** or \_\_\_\_ **are not** a United States citizens or legal permanent residents. (This applies only to individuals).

Applicants \_\_\_\_ **are** or \_\_\_\_ **are not** obtaining this account on behalf of a non-United States citizen or legal permanent resident.

Date: \_\_\_\_\_

Individual Applicant Name: \_\_\_\_\_

Individual Applicant Signature: \_\_\_\_\_

Individual Applicant Name: \_\_\_\_\_

Individual Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Business Entity Name: \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Its (Title): \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Its (Title): \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Its (Title): \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Its (Title): \_\_\_\_\_

Authorized Signatory: \_\_\_\_\_

Its (Title): \_\_\_\_\_

Ocean Capital Lending

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