

AMERICAN PRUDENTIAL CAPITAL, INC. - APPLICATION

1. Business Name:

2. Address: _____ City: _____ State: _____ Zip: _____

3. Phone: () _____ Fax: () _____ Federal ID #: _____

4. Federal taxes past due? ___Yes ___No State taxes past due? Yes ___No Amount \$ _____

5. Have you ever filed bankruptcy? ___Yes ___No Where? _____ When? _____

6. Other business names used within the past five (5) years: _____

7. Is Company incorporated? ___Yes___No What State? _____ Number of Employees _____

8.	President or	Name: _____	Title: _____
	Partner or	Home Address: _____	City: _____ State: _____ Zip: _____
	Owner	Phone: () _____	Social Security #: _____
		Driver's License #: _____	State: _____ Percent of Company owned: _____

9.	Secretary or	Name: _____	Title: _____
	Partner or	Home Address: _____	City: _____ State: _____ Zip: _____
	Shareholder	Phone: () _____	Social Security #: _____
		Driver's License #: _____	State: _____ Percent of Company owned: _____

10. Average Monthly Sales: \$ _____ Outstanding Receivables: \$ _____

11. Approximate # of customers _____ Terms of Sale _____

12.	Business	Name of Bank: _____	Phone: () _____
	Bank	Address: _____	City: _____ State: _____ Zip: _____
	Account	Officer: _____	Account #: _____

13. Are there any liens against any receivables? ___Yes___No To Whom: _____

14. Are any other assets assigned, pledged or liened? ___Yes___No To Whom: _____

15. Who referred you to us? _____

ALL OF THE ABOVE STATEMENTS ARE TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF. SIGNATURE ON THIS FORM CONSTITUTES PERMISSION TO RELEASE ANY AND ALL FINANCIAL INFORMATION REQUESTED TO AMERICAN PRUDENTIAL CAPITAL, INC.

Print your name Title Print your name Title

Signature Date Signature Date

Please fax this application to Brenda Standlee at 713- 690- 8855