



# Tetra Capital Factoring Application

Tetra Capital LLC  
 11645 S 700 E, Ste 100  
 Draper, UT 84020  
 PH: 877-487-1887  
 FAX: 877-734-1051

Business Name:		Legal Status (Sole Prop, LLC, INC, etc)	
Date established:	State of Incorporation:	FED TIN:	
Phone:	Fax:	Mobile Phone:	
Street address:			
City:	State:	ZIP Code:	
Email:	Number of Trucks:	MC #	
Taxes Past Due?	Tax Lien Filed?	Personal Taxes Past Due?	

### OFFICERS, OWNERS, AND PARTNERS INFORMATION

Name and Title:			Percent Owned:
Full Address:			
Phone:	Date of Birth:	SSN:	
Name and Title:			Percent Owned:
Full Address:			
Phone:	Date of Birth:	SSN:	

### FACTORING ACCOUNT INFORMATION

Current Factoring Company:	
Current Account Balance Outstanding:	Anticipated Monthly Factoring Volume:

### CUSTOMER / BROKER LIST

Name	Phone number	Contact Name

### ITEMS REQUIRED TO COMPLETE THE SETUP OF A NEW ACCOUNT

Articles of Organization & Tax Returns Liability & Cargo Ins. (name Tetra Capital as cert. holder) Copy of Applicant(s) Driver's License(s)	Copy of Operating Authority (MC# ) Copy of a Voided Check W-9 Form
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### TRADE REFERENCES

Name	Phone Number	Relationship

### HOW DID YOU FIND OUT ABOUT TETRA CAPITAL?

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### SIGNATURES AND AUTHORIZATION

I understand that the submission of this application to Tetra Capital, LLC (hereinafter Tetra) does not obligate Tetra to factor/finance or provide any financial services whatsoever. The above statements are true and correct to the best of my information and belief. This serves as my permission for the release of any information to Tetra regarding this application for the purpose of credit investigation. I hereby authorize Tetra to investigate the credit of all parties listed above. I also herein authorize Tetra to contact our customers to verify payment history.

Name and Signature of applicant:	Date:
Name and Signature of applicant:	Date: