



# INDUSTRIAL ASSETS CAPITAL

ASSET BASED FINANCING & LEASING

AN INDUSTRIAL ASSETS COMPANY

## INDUSTRIAL ASSETS CAPITAL APPLICATION

Industrial Assets Capital  
11426 Ventura Blvd. Floor 2  
Studio City, CA 91604

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### BUSINESS INFORMATION

Brief description of business: \_\_\_\_\_  
\_\_\_\_\_

Legal Business Name: \_\_\_\_\_

Federal ID #: \_\_\_\_\_

Entity Type:  Corporation  LLC  Sole Proprietorship  Partnership  Other

Date Established \_\_\_\_\_

Trade Name/D.B.A: \_\_\_\_\_

Address: \_\_\_\_\_

City, State/Province, Zip: \_\_\_\_\_

County: \_\_\_\_\_

Website: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Does the company own real property?  YES  NO

If yes, address of the owned real property:  
\_\_\_\_\_  
\_\_\_\_\_

Overall Sq. Ft.: \_\_\_\_\_

If company does NOT own real property, does a related entity own real property? If yes, please provide names of related entity and corresponding real property address:  
\_\_\_\_\_  
\_\_\_\_\_



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## OWNERSHIP INFORMATION

Owner's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Own  Rent

Home Telephone \_\_\_\_\_ Cell Number: \_\_\_\_\_ SSN: \_\_\_\_\_

Ownership Percentage: \_\_\_\_\_ % Title: \_\_\_\_\_

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

### Additional Owner:

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Own  Rent

Home Telephone \_\_\_\_\_ Cell Number: \_\_\_\_\_ SSN: \_\_\_\_\_

Ownership Percentage: \_\_\_\_\_ % Title: \_\_\_\_\_

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

## TRUST INFORMATION

Do any of the owners have a Trust?  YES  NO

If yes, please provide the name (s) of Trust (s) below and provide a copy of each trust

\_\_\_\_\_

## BUSINESS PROFESSIONALS INFORMATION

Accountant's Name: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

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



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Phone: \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

Attorney's Name: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax \_\_\_\_\_ Email: \_\_\_\_\_

## TAX INFORMATION

Number of employees: \_\_\_\_\_

How often do you file 941 Payroll Taxes?  Weekly  Monthly  Quarterly  Yearly

Are Payroll Taxes current?  YES  NO

Are there any outstanding Personal Property or Real Property taxes?  YES  NO

If yes, how much? \_\_\_\_\_

Do you have any Federal or State Taxes past due?  YES  NO

If yes, has lien been filed?  YES  NO

If yes, list type, quarter/year and amounts below:

Type: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_ Amount \_\_\_\_\_

## BANKING INFORMATION

**Business Checking Account** \_\_\_\_\_ **Bank Name:** \_\_\_\_\_

Address: \_\_\_\_\_

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

Account Numbers: \_\_\_\_\_

Bank Officer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Business Loan Account** \_\_\_\_\_ **Name of Financial Institution:** \_\_\_\_\_



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How long with institution? \_\_\_\_\_ Loan Amount: \_\_\_\_\_ Phone: \_\_\_\_\_

Collateral: \_\_\_\_\_

**Personal Account** of:  President  Proprietor  Partner

Bank Name: \_\_\_\_\_ Date Account Opened: \_\_\_\_\_

Address: \_\_\_\_\_

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

Checking Account No.: \_\_\_\_\_ Phone: \_\_\_\_\_

## MACHINERY & EQUIPMENT COLLATERAL INFORMATION

What is the purpose of the funds you are requesting?

\_\_\_\_\_

Is there a formal appraisal existing that provides the total liquidation value for the machinery and equipment?

YES  NO

If yes, please attach a copy of the appraisal.

If no formal appraisal exists, please provide an accurate machinery and equipment listing.

\_\_\_\_\_

Are receivables pledged as collateral?  YES  NO

If yes, to whom? \_\_\_\_\_

Is inventory currently pledged as collateral?  YES  NO

If yes, to whom? \_\_\_\_\_

Are there any commercial loans/leases outstanding?  YES  NO

If yes, list here: \_\_\_\_\_

Has the machinery and equipment been operated in any other physical location?  YES  NO

If yes, list all below:

Address: \_\_\_\_\_



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Why do you need financing?

\_\_\_\_\_

Are you currently in default?  YES  NO

Are you in a restructuring?  YES  NO

Please list any lawsuits or tax liens:

\_\_\_\_\_

Who is providing your current financing on the machinery and equipment?

\_\_\_\_\_

What is the amount currently owned on the machinery and equipment?

\_\_\_\_\_

Who is providing your current Line of Credit?

\_\_\_\_\_

What is the amount of this Line of Credit? \_\_\_\_\_

What is the current outstanding amount on this Line of Credit? \_\_\_\_\_

As of: \_\_\_\_\_

How did you hear about Industrial Assets?

\_\_\_\_\_

The information supplied in this Application for Funding and all forms, financial statements and documents submitted in connection herewith are true and correct to the best of my knowledge and belief. The undersigned individual who is either a principal of the credit applicant or the sole proprietor of the credit applicant recognizing that his/her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report, from time to time as may be needed, for credit evaluation purposes. The undersigned without further notice hereby authorizes Industrial Assets Capital, and/or its designates or assignees to obtain a consumer credit report and to make whatever inquiries deemed necessary concerning the parties herein for credit evaluation purposes no or at any time in the future.

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

Print Name: \_\_\_\_\_ Print Title: \_\_\_\_\_

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

Print Name: \_\_\_\_\_ Print Title: \_\_\_\_\_

Return this form by fax 818-508-3025 or email tali@industrialassets.com with a copy of your Certificate of Incorporation