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 Midvale, Utah 84047
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APPLICATION

COMPANY INFO

Business Name and DBA (if any)		Email	
Address		City	State/Zip Code
Mobile Number	Fax Number		Office Number
State of Registration	Date Established	Federal Tax ID	MC Authority #
Business Type C Corp <input type="checkbox"/> S Corp <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Prop <input type="checkbox"/>		State Organizational ID	
# Company Trucks	# Owner Operators	Open Accounts Receivable	Average Monthly Sales

COMPANY OWNERS (if there are more than one, please include a separate sheet)

Full Name	Title	Social Security Number	% of Ownership	
Home Address		City	State	Zip Code
Drivers License Number	State Issued	Expiration	DOB	

VENDOR INFORMATION

Current Factor (if any)	Fuel Card (if any)
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Have you, this company, any of its officers or directors, or any affiliated companies ever:

- Been convicted of a felony? Yes No
- Filed bankruptcy, had a petition in bankruptcy filed against it, or a receiver appointed? Yes No
- Made an Assignment for the benefit of creditors? Yes No
- Had a judgment filed against it? Yes No
- Had or have a Federal, State, County or Municipal lien/levy filed against it? Yes No
- Presently owe past due federal or state taxes? Yes No
- Been involved in or are currently engaged in, or threatened with any litigation? Yes No
- Participate in any mergers, acquisitions or asset purchases in the past 5 years? Yes No

By executing this application, the undersigned person(s) certifies to the following: That he/she is an authorized representative of the company and has authority to complete the application on behalf of the company; The information set forth in this application and in any documents, reports, statements, and/or other information provided to iThrive Funding, LLC (iThrive) are full, true, correct, and complete and accurately reflect such information on the date(s) thereof; that iThrive is authorized to request, receive, and verify credit reports and other financial information regarding applicant(s) and its business that iThrive deems necessary and appropriate; that iThrive is authorized to execute in the name of the undersigned person(s); and that iThrive is authorized to inquire of, investigate, confirm, and verify any information contained in this application, in any documents, reports, statements, and/or other information provided under or pursuant to this application, or learned by iThrive as part of its investigation and review of this application, applicant(s), or applicants' business. iThrive is authorized to file UCC Financing Statements concerning all accounts of applicant upon execution of this application. In the event funding does not occur, iThrive will terminate the filings. iThrive may be (is) required by the USA Patriot Act to obtain documentary and/or corporation or other entity's identity regardless of any prior relationship such customer may have with iThrive. This verification may include obtaining a copy of the customer's driver license or verifying information through credit bureaus, public databases or any other sources.

MUST BE SIGNED BY MAJORITY OWNER(S) OF THE COMPANY (Please attach additional sheets if necessary)

Signed: _____ Date: _____

Print Name and Title: _____

EMAIL APPLICATION TO: SALES@ITHRIVEFUNDING.COM OR FAX TO: (801) 405-6204