



Complete Legal Name			Federal Tax ID (xx-xxxxxx)	
Street Address		City	State	Zip
Company Telephone (xxx-xxx-xxxx)	Company Fax (xxx-xxx-xxxx)	Company Website		
Contact Name	Contact Cell Telephone (xxx-xxx-xxxx)	Contact Email		
What Products / Services are Provided?			Tradestyle Names?	
Annualized Sales	Terms Offered	Av. # Invs / Month	# Employees	Fiscal Year End
Company Entity Type	Other Type	State Organized	Organizational ID	
<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company				
Bank Name	Account Officer / Contact	Contact Telephone Number (xxx-xxx-xxxx)		
Lender's Name	Account Officer / Contact	Contact Telephone Number (xxx-xxx-xxxx)		
Contact Email	Amount Owning	Facility Type	Security Held by Lender	

**SUPPORTING / SUPPLEMENTAL INFORMATION: Please provide the below information (check off items you are including)**

- |   |   |
|---|---|
| <input type="checkbox"/> Most recent DETAILED invoice ageing -PLEASE PROVIDE IN EXCEL OR CSV FORMAT IF POSSIBLE | <input type="checkbox"/> Most recent Accounts Payable ageing  |
| <input type="checkbox"/> Customer list with phone numbers, addresses, fax, and email                            | <input type="checkbox"/> Last year end Balance sheet and income statement, as available             |
| <input type="checkbox"/> Photo copies of principle(s) Driver's License or other Photo ID                        | <input type="checkbox"/> Year to date interim Balance sheet and income statement, as available      |
| <input type="checkbox"/> Sample copy of an Invoice and back up we can expect                                    | <input type="checkbox"/> Articles of Organization, Fictitious Name filings, and Operating Agreement |

1. Any Consignment, right of return, End of Season, or other similar allowances?	<input type="checkbox"/> NO if Yes, Explain Below
2. Any Progress, Milestone, or billing subject to Retainage?	<input type="checkbox"/> NO if Yes, Explain Below
3. Do any of your customers bill you for products or services?	<input type="checkbox"/> NO if Yes, Explain Below
4. Invoices Supported By Purchase Orders, Contracts, SOW, or Time Slips?	<input type="checkbox"/> NO if Yes, Explain Below
5. Do you bill before completion of delivery or services?	<input type="checkbox"/> NO if Yes, Explain Below
6. Are there any security lien filings, or assignments of proceeds?	<input type="checkbox"/> NO if Yes, Explain Below
7. Does the company, its owners, officers, directors or guarantors have, or have had in the past any affiliation with any other business in the past five (5) years?	<input type="checkbox"/> NO if Yes, Explain Below
8. Does the company, its owners, officers, directors or guarantors have, or have had in the past, been involved in any litigation, bankruptcies, judgments, active or satisfied liens, including tax liens or liens from lenders against any of its assets (exclude leased equipment), credit problems, criminal charges or convictions, or regulatory actions against them?	<input type="checkbox"/> NO if Yes, Explain Below
9. Does the company, its officers, and or owners have any unpaid taxes including payroll, sales, income, or any other state, local or federal fees or taxes?	<input type="checkbox"/> NO if Yes, Explain Below

**Explain any "YES" answers to above.** Please indicate the question number in your response. Use additional pages if needed.

**OFFICERS, SHAREHOLDERS, & MANAGEMENT (use additional pages if necessary to list all principles and/or officers)**

The following undersigned individuals hereby authorize Bridgeport Capital Services, Inc. to obtain credit report(s) and conduct background investigation(s):

Full Legal Name (Print)	Corporate Title	Social Security Number	Date of Birth	% Owned	Signature

Electronic Signatures and Counterparts. This form may be executed by means of (a) an electronic signature that complies with the federal Electronic Signatures in Global and National Commerce Act, state enactments of the Uniform Electronic Transactions Act, or any other relevant and applicable electronic signatures law; (b) an original manual signature; or (c) a faxed, scanned, or photocopied manual signature. Each electronic signature or faxed, scanned, or photocopied manual signature shall for all purposes have the same validity, legal effect, and admissibility in evidence as an original manual signature. Bridgeport reserves the right, in its sole discretion, to accept, deny, or condition acceptance of any electronic signature on this document. This form may be executed in any number of counterparts, each of which shall be deemed to be an original, but such counterparts shall, together, constitute only one instrument. Delivery of an executed counterpart of a signature page of this form will be as effective as delivery of a manually executed counterpart of the form.

I understand this is not an application for credit. The intent of this profile is for Bridgeport Capital Services, Inc. to determine if a relationship between you and us would be mutually beneficial. I certify that the information provided in this profile and the Supplemental Information required is true and correct as of the date of this profile. I authorize all credit, lien, other investigative searches as well as reference checks and any other investigations on the company and its Principals and Officers, and hereby irrevocably release you and hold you harmless from any claim of any kind related to or arising out of any such investigation. Further, I approve and accept financial responsibility to cover any costs you may incur in conducting your investigation. Upon request, you will provide us with an invoice of any costs you have expended on our behalf to conduct your investigation. I appoint you and your assigns as my agent and attorney-in-fact to sign and file UCC financing statements for protecting your security interest under any agreements and transactions relating to our firms. We will promptly notify you of any intended changes in the facts concerning our organization, name, places of business, authorities and other matters presented to you. I understand that any misrepresentations, fraudulent entries, or omissions on this profile and the Supplemental Information may be used for legal action.

Signature	Date	Title	Print Name



I/we the below undersigned individual(s) hereby authorize Bridgeport Capital Services, Inc. as servicing agent for Bridgeport Capital Funding, LLC to obtain personal credit report(s) and conduct background investigation(s) for each individual listed below including all credit, lien, other investigative searches as well as reference checks and any other investigations. I/we, certify that the information provided is true and correct, and I/we understand that any misrepresentations, fraudulent entries, or omissions on the application or the Supplemental Information may be used for legal action.

PLEASE WRITE LEGIBLY – USE ADDITIONAL PAGES AS NEEDED.

<b>Shareholder/ Owner #1</b>			
Print Full Legal Name		Corporate Title	Percent of Ownership:
Home Street Address		City	State
Social Security Number (xxx-xx-xxxx)		Date of Birth	Home Telephone (xxx-xxx-xxxx)
Driver's License Number		Email Address (business and personal)	
<b>SIGNATURE Shareholder/ Owner #1</b>		<b>Date:</b>	
<b>Shareholder/ Owner #2</b>			
Print Full Legal Name		Corporate Title	Percent of Ownership:
Home Street Address		City	State
Social Security Number (xxx-xx-xxxx)		Date of Birth	Home Telephone (xxx-xxx-xxxx)
Driver's License Number		Email Address (business and personal)	
<b>SIGNATURE Shareholder/ Owner #2</b>		<b>Date:</b>	
<b>Shareholder/ Owner #3</b>			
Print Full Legal Name		Corporate Title	Percent of Ownership:
Home Street Address		City	State
Social Security Number (xxx-xx-xxxx)		Date of Birth	Home Telephone (xxx-xxx-xxxx)
Driver's License Number		Email Address (business and personal)	
<b>SIGNATURE Shareholder/ Owner #3</b>		<b>Date:</b>	
<b>Shareholder/ Owner #4</b>			
Print Full Legal Name		Corporate Title	Percent of Ownership:
Home Street Address		City	State
Social Security Number (xxx-xx-xxxx)		Date of Birth	Home Telephone (xxx-xxx-xxxx)
Driver's License Number		Email Address (business and personal)	
<b>SIGNATURE Shareholder/ Owner #4</b>		<b>Date:</b>	

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