

# **RED OAK APPLICATION CHECKLIST**

Thank you for your interest in our inventory finance program. To process your application, please complete the following forms and provide the requested documentation. Applications may be submitted via email to Sales@RedOakInventoryFinance.com or directly to your sales representative below.

### **Complete the Following Forms:**

- Floorplan Application
- Inventory Location List
- Personal Financial Statements for each owner (no older than 180 days, signed and dated)

#### **Provide Copies of the Following Documents:**

- Organizational Documents
  - > Sole Proprietorship Provide copy of driver's license
  - **Partnership** Provide copy of Partnership Agreement (and any amendments)
  - Corporation or Sub "S" Corporation Provide Articles of Incorporation, Bylaws, and any Shareholders' Agreement (and any amendments)
  - ➤ Limited Liability Company Provide Articles of Organization and Operating Agreement (and any amendments)
- Last Two Years Business Financial Statements
  - For Sole Proprietorships, most recent two years of Personal Tax Returns including Schedule C and a corresponding year-end balance sheet
- YTD Interim Business Financial Statements (Balance Sheet and Profit and Loss; with prior comparable period)
- Copy of Most Recent Billing Statement from Floorplan Lenders
- Screenshot of Online Account Summary from Current Floorplan Lenders
- Copy of Driver's License for all Principals/Personal Guarantors
- Business Plan, Owner Background, and/or Resume(s) (for businesses under 2 years)



# **FLOORPLAN APPLICATION**

APPLICANT BASIC INFORMATION													
Requested Credit Line Amount: Manufacturer(s) to Finance:  \$													
Exact Legal Business Name:					DBA:								
Business Phone #:						Email Address:							
Federal Tax ID:					Business Website:								
Entity Type: 🗆 (	Corporation $\square$	LLC 🗆	Partnership	 O	☐ Sole Proprietorship								
State of Formation:  Date Company Formed:							Current Owne	rship:	Business	Fiscal Year End:			
Primary Contact:		Primary Co	ontact Title:		Pri	mary Con	ntact Phone:	Primary Contact Email:					
Has this entity <b>eve</b>	r filed hankruntov	· □ Yes	□ No. If	vec 3	ttach a	dditional	sheet with explar	nation					
Are there any lega				_					anation				
Does this entity ha									anation.				
☐ Yes ☐ No If y						-	=		,				
ADDRESSES	cs, attach additiona	i sheet with c	Apianation w	71(11 30	арроги	ing docum	chation from th	c tax authority					
Main Physical Busi	ness Address:			City	<b>/</b> :			State:		Zip:			
Landlord Name:								Lease Payment:					
Mailing Street Address (if different):						ity:				Zip:			
Additional Inventory Location Street Address: Cit					ity:			State:		Zip:			
Landlord Name:						Le \$			Lease Payment: \$				
Additional Inventory Location Street Address: Ci					City:			State:		Zip:			
Landlord Name:								Lease Payn	Lease Payment: \$				
APPLICANT OWNER INFORMATION (If Applicant has more than 4 owners, please attach additional sheets)													
Owner Name:		Title:			Cell Phone #:								
% of Ownership:	% of Ownership:   Social Security Number:   Date of Birth			irth:	Years in Industry:			Personal Email address:					
Home Address: City:					State:			Zip:					
Owner Name:								Cell Phone #:					
% of Ownership:	Social Security N	lumber:	r: Date of Birth:			Years in Industry:		Personal Email address:					
Home Address: City:				State:			Zip:						
Owner Name:					Title:			Cell Phone #:					
% of Ownership: Social security Number: Date of Birth			irth:	: Years in Industry:			Personal Email address:						
Home Address: City:						1	State:		Zip:				

Owner Name:				Title:		Cell Phone #:					
% of Ownership: Social Security Number:		Date of Birth:	Yea	Years in Industry:		Personal Email		mail address:			
Home Address:			City:		State:		Zip:				
Have any of these	tcy? □ Yes	□ <b>No</b> If y	es, attach a	dditional s	heet with	explanation	on.				
Are there any legal											
Do any of these inc											
☐ Yes ☐ No If y	es, attach additiona	l sheet with e	xplanation with su	upporting do	cumentatio	n from the	e tax autho	ority.			
AFFILIATED ENTITI	ES (i.e., Real Esta	te Holding C	ompany or Pare	ent Compa	ny)						
Exact Business Nar	ne:						DBA:				
Address:			City:			State:			Zip Code:		
How is the entity r	How is the entity related to the Business?										
FINANCIAL ACCOU	INT INFORMATIO	N									
Bank Name:				City:					State:		
Revolving Line of Credit Limit: Current Amo			nount Drawn:	Current Checking Account Balan			Balance:	Current Availability:			
OTHER FLOORPLA	N LENDERS										
Floorplan Finance	Company Name:			Credit L	Credit Line Amount:			Current Balance:			
Floorplan Finance Company Name:					Credit Line Amount:			Current Balance:			
Floorplan Finance	Company Name:			Credit L	Credit Line Amount:			Current Balance:			
Oak for such purpose. E of credit. In the event t connection with this ap Personnel") to gather a reports on any individu accounts. Applicant cer if the information subn vehicles, and is principal Vehicle Code § 285, Uta purposes; (iv) the subm	oplication to Red Oak I by signing this application that the application is a plication. Applicant he and use, from time to ual who is an Applicar tifies, acknowledges a nitted changes before ally directed or manage an Code § 41-3-102 or hission of this application. The	nventory Finan on, Applicant a rejected and Re reby authorize: time, any and at or proposed and agrees that: closing, this in ed from or a le New York Vehi on does not rep ne undersigned	uthorizes Red Oak to ed Oak does not exte s Red Oak and its em all financial, credit, guarantor) relating (i) the information p formation must be of gal resident of New No cle and Traffic Law § present a commitme	o file a UCC firend any credit aployees, ager and other in to Applicant provided in thi updated and/ York, Utah or 415 (iii) all fir nt to lend; (v)	nancing stater t to Applicant, nts, parent con formation (ind for purposes is application por or supplemer California, it is nancing provid Applicant will d Oak and Red ency and other	nent evider  Red Oak s  mpanies, su  cluding con  of evaluati  package inc  ited; (ii) If I  s a "dealer"  ded by Red  I provide ar  d Oak Perso	ncing a lien of hall termina ubsidiaries, a sumer creding this appoiluding finar Applicant is of "motor Oak will not additiona onnel to inv	on Applicar ate any UCC affiliates an lit reports lication and cial statem in the busi vehicle dea t be used for I information	mation in this application to Red nt's assets prior to any extension C financing statements it filed in a dassigns (collectively, "Red Oak and any investigative consumer d reviewing and collecting your nents are true and complete and iness of selling or leasing motor aler" as defined under California or personal, family or household on requested by Red Oak or Red he personal credit history of the sole discretion.		
Printed Name and Title of Person signing on behalf of Business:								Date:			
	*** <b>A</b> II	nrincipale.	hat own more tl	han 10% e	husiness	ood to e	ian balaw	,** <u>*</u>			
Owner Name:	AII	principals t	nat own more ti	Signature		reeu to s	igirbelow	Date:			
Owner Name.				Jigiiatule	•			Date.			
Owner Name:				Signature:				Date:			
Owner Name:				Signature:				Date:			
Owner Name:				Signature	Signature:			Date:			
	ed Oak to PO Box 326 A	Alpharetta GA 3	-	0) days from	the date you	are notified	l of our deci	sion. Upon	ne statement, please submit the receipt, we will then send you		

a written statement of the reasons for the denial within thirty (30) days of your request. General inquiries can be directed to Red Oak at 470-256-3100.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.



### PERSONAL FINANCIAL STATEMENT

AS OF DATE \_\_\_\_\_\_

NAME: \_\_\_\_ADDRESS:

ADDRESS:

EMPLOYER: POSITION: # YEARS:

SPOUSE:

ASSETS	DOLLARS		LIABILITIES	DOLLARS		
Cash, Checking, Savings, CDs (S			Revolving Debt (Credit Care	ds, etc.)		
Marketable Securities (SCH. A)			Other Personal Loans			
Accounts and Notes Receivable			Home Equity Loan or HELO	С		
Retirement Accounts (IRA/401)	K)			Income and Other Taxes Pa	ayable	
Personally Owned Real Estate (	SCH. B)		Real Estate Mortgages (SCH. B)			
Personal Vehicles			Note Payables on Vehicles			
Equity in Closely Held Business Including Real Estate (SCH. C)	_			Other Liabilities (List)		
Cash Surrender Value – Life Ins	urance					
(Not the face value of term ins						
Other Assets (List)						
				NET WORTH (TOTAL ASSET TOTAL LIABILITIES)	'S LESS	
TOTAL ASSETS (SUM OF ABOVE)				TOTAL LIABILITIES + NET W	ORTH	
			<b>EQUALS TOTAL ASSETS</b>			
ANNUAL		ANNUAL			RES	
Salary/Commission/Bonus	ommission/Bonus			al Estate Payments		
Salary – Spouse	alary – Spouse			nt		
Interest/Dividends			Income Taxes			
Rentals			Insurance Premiums			
Pension/Social Security			Pro	pperty Taxes		
Alimony			Chi	ild Support		
Other Income (Describe)			Otl	her Expenses (Describe)		
TOTAL INCOME		TO	TAL EXPENSES			

SCHEDULE A – CASH, STOCKS, BONDS, MUTUAL FUNDS										
INSTITUTION		DESCI	RIPTION		CURRENT MARKET VALUE					
SCHEDULE B – REAL ESTATE HO	OLDINGS OWNED	PERSONALLY								
DESCRIPTION/ADDRESS	TITLE NAME	DATE PURCHASED	COST	PRESENT VALUE		AMOUNT OWED	LENDER NAME			
TOTAL: \$										
				(ENTE	R PG 1)	(ENTER PG 1)				
SCHEDULE C – BUSINESS ENTIT	TES OWNED INCL	UDING REAL EST	ATE HOLDINGS	OWNED	THRO	UGH BUSINESS E	NTITIES			
DESCRIPTION/ADDRESS	CRIPTION/ADDRESS TITLE NAME DATE PURCHASEI		COST	PRESENT VALUE		AMOUNT OWED	LENDER NAME			
			TOTAL	: \$	\$					
(ENTER PG 1) (ENTER PG 1)										
The undersigned certifies to Red Oak Inventory Finance, LLC that the above statement and supporting schedules provide an accurate statement of financial condition of the undersigned as of the date indicated.										
SIGNATURE:	SIGNATURE: DATE:									
SPOUSE SIGNATURE:  (IF JOINT STATEMENT)					DATE:					
•										