

APPLICATION

Please email to Pamela.James@TritonBusiness.com
Or fax to 678-228-8694

GENERAL INFORMATION			
First Name	Last Name	Middle Initial	Mobile Telephone Number
Home Address	City	State	Zip Code
BUSINESS INFORMATION			
Full Legal Name of Business			
Other Names of Business (DBAs)			
Primary Contact Name and Title			
Type of Business Entity <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership			
Business Address	City	State	Zip Code
Business Telephone Number	Business Fax Number		
Primary Contact's Business Email Address		Primary Contact's Personal Email Address	
Business Federal Tax ID Number	State Where Business Is Incorporated	Do you currently have ownership in any other company or business? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Loan Amount Requested	Have you been disapproved for any loan submitted in the past six months? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Number of Current Projects	Number of Projects Completed In Last 5 Years		
OTHER INFORMATION			
Are there currently any lawsuits or tax liens against you or your company? <input type="checkbox"/> YES <input type="checkbox"/> NO	Do you currently have any lien holders against your company? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Do you currently have any accounts in collections? <input type="checkbox"/> YES <input type="checkbox"/> NO	Have you filed for personal or corporate bankruptcy in the last five years? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Are you a citizen of the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you a veteran of the U. S. Armed Forces? <input type="checkbox"/> YES <input type="checkbox"/> NO		
APPLICANT SIGNATURE			
Applicant Name	Co-Applicant Name		
Applicant Signature	Co-Applicant Signature		
Date	Date		