



STALLIONGATES CAPITAL

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Accounts Receivable Financing Application

Invoice factoring and A/R financing to improve cash flow by advancing funds against outstanding invoices.

Business Information

Legal Business Name:

Business Address:

Industry:

Year Established:

Number of Employees:

Annual Revenue:

Accounts Receivable Information

Total A/R Outstanding:

A/R 0-30 Days:

A/R 31-60 Days:

A/R 61-90 Days:

A/R 90+ Days:

Number of Active Customers:

Largest Customer (% of A/R):

Customer Information

Customer Types (B2B/B2G/B2C):

Average Invoice Size:

Average Payment Terms:

Average Days to Pay:

Financing Request

Monthly Factoring Volume Needed:

Advance Rate Requested (%):

Recourse or Non-Recourse:

Required Documents

A/R Aging Report

Sample Invoices

Customer List

3 Months Bank Statements

Business Tax Returns

Articles of Incorporation

Authorization & Certification

By signing below, I certify that all information provided in this application is true and complete to the best of my knowledge. I authorize Stalliongates Capital and its lending partners to verify all information provided, obtain credit reports, and share information with potential lenders for the purpose of evaluating this loan application.

Applicant Signature: _____

Date: _____

Print Name: _____

Title: _____