

# Outstanding Business Debt Form

## Instructions

To be completed by applicant business owner. Please list all outstanding debts associated with your business. Providing specific details will make it easier for your underwriter to accurately evaluate your application. Omitting debt obligations or providing incorrect information may delay or hinder your ability to receive an offer.

If your business has no outstanding debts, please check this box and sign at the bottom of the page

	<b>CREDITOR / LENDER NAME</b> <small>If you have a large number of equipment finance agreements, you may provide a combined total of those agreements in a single line</small>	<b>ORIGINATON DATE</b> <small>MM/DD/YY</small>	<b>CURRENT OUTSTANDING BALANCE</b>	<b>REQUIRED MONTHLY PAYMENT</b>	<b>CREDIT LIMIT</b> <small>Only for credit cards or line of credit</small>	<b>WHAT WAS THIS DEBT USED FOR?</b> <small>Select from the list of options below</small>	<small>Do you plan to refinance this debt if you are approved for a new loan?</small>
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

Please continue on next page to list additional creditors/lenders

### List of options to answer "Use of debt"

- Purchase another business
- Purchase equipment
- Purchase inventory
- Purchase supplies and materials
- Purchase new real estate
- Open a new location
- Remodel the business location
- Hire new employees
- Develop a new product or service
- Acquire new contracts
- Marketing and advertising
- Pay off taxes, tax liens, or judgments
- Pay off existing business debt
- Other

### BUSINESS NAME

### FIRST AND LAST NAME

By returning this Current Outstanding Business Debts form (this "Form"), you affirm that: (i) you answered all items in this loan application fully, accurately and completely; (ii) you are authorized to submit this Form on behalf of the person and/or business whose name(s) you have entered in this Form; (iii) you understand that this Form does not commit us to making a loan.

	<b>CREDITOR / LENDER NAME</b> If you have a large number of equipment finance agreements, you may provide a combined total of those agreements in a single line	<b>ORIGINATON DATE</b> MM/DD/YY	<b>CURRENT OUTSTANDING BALANCE</b>	<b>REQUIRED MONTHLY PAYMENT</b>	<b>CREDIT LIMIT</b> Only for credit cards or line of credit	<b>WHAT WAS THIS DEBT USED FOR?</b> Select from list of options on page 1	Do you plan to use a Funding Circle loan to pay off this debt?
6							YES <input type="checkbox"/> NO <input type="checkbox"/>
7							YES <input type="checkbox"/> NO <input type="checkbox"/>
8							YES <input type="checkbox"/> NO <input type="checkbox"/>
9							YES <input type="checkbox"/> NO <input type="checkbox"/>
10							YES <input type="checkbox"/> NO <input type="checkbox"/>
11							YES <input type="checkbox"/> NO <input type="checkbox"/>
12							YES <input type="checkbox"/> NO <input type="checkbox"/>
13							YES <input type="checkbox"/> NO <input type="checkbox"/>
14							YES <input type="checkbox"/> NO <input type="checkbox"/>
15							YES <input type="checkbox"/> NO <input type="checkbox"/>