

APPLICATION - Page 1

In order to expedite the approval process, please fill out this application completely. After initial approval is given, additional information may be required prior to funding.

COMPANY INFORMATION

Business Name: _____ Date Established: _____
 Street Address: _____ Phone: _____
 City: _____ Province: _____ Postal Code: _____ Cell Phone: _____
 E-mail Address: _____ Web Address: _____ Fax: _____
 Legal Status: Corporation LLC Partnership Sole Proprietorship GST Number: _____
 Type and description of Business: _____ Number of Employees: _____
 Federal or Provincial Taxes Past Due? Yes No If yes, Type/Amount: _____ /\$ Tax lien filed? Yes No

OFFICERS, OWNERS, OR PARTNERS

If there are more than two owners, please list any additional persons in the Notes section of the application.

Name & Title: _____ % Owned: _____ Driver's License #: _____
 Home Street Address: _____ Own Rent
 City: _____ Province: _____ Postal Code: _____ Home Phone: _____
 E-mail Address: _____ Date of Birth: _____ Social Insurance #: _____

Name & Title: _____ % Owned: _____ Driver's License #: _____
 Home Street Address: _____ Own Rent
 City: _____ Province: _____ Postal Code: _____ Home Phone: _____
 E-mail Address: _____ Date of Birth: _____ Social Insurance #: _____

BUSINESS BANKING INFORMATION

Name of Bank: _____ Date Opened: _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Chequing Account Number: _____ Any Commercial Loans Outstanding? Yes No
 Loan Account Number/Amount: _____ /\$ Bank Officer: _____

SUPPLIER INFORMATION

NAMES OF PRINCIPAL SUPPLIERS	PRODUCTS SUPPLIED	PHONE NUMBER
A. _____	_____	_____
B. _____	_____	_____
C. _____	_____	_____

APPLICATION - Page 2

MISCELLANEOUS INFORMATION

Anticipated monthly factoring volume: _____ Current receivables outstanding: _____

Requested first funding date: _____ Amount of funding required: _____

How did you find out about Riviera Finance? _____

Have you factored before? Yes No If yes, with whom? _____

LANDLORD INFORMATION

Are you presently leasing your business space? Yes No Period of Present Lease: _____

Name of Landlord and/or Management Company: _____

Street Address: _____ Monthly Rental Amount: _____

City: _____ Province: _____ Postal Code: _____ Phone: _____

SUPPORT INFORMATION CHECKLIST

Please include the appropriate support information with your completed application and submit to Riviera.

- | | |
|--|---|
| <input type="checkbox"/> Invoices to Factor (include purchase orders and/or contracts) | <input type="checkbox"/> Most Recent Monthly Revenue Canada Statement |
| <input type="checkbox"/> Customer List with Addresses | <input type="checkbox"/> General Liability Insurance Certificate |
| <input type="checkbox"/> Accounts Receivable Aging | <input type="checkbox"/> Articles of Incorporation or Assumed Name Certificate |
| <input type="checkbox"/> Bank Authorization Form (to be provided) | <input type="checkbox"/> Vehicle/Cargo Insurance (Trucking Firms) |
| <input type="checkbox"/> Tax Information Form (to be provided) | <input type="checkbox"/> Copies of Active Provincial and US Motor Carrier Authorities |
| <input type="checkbox"/> Current Financial Statements | <input type="checkbox"/> Workers' Comp. Insurance & Recent WCB Quarterly Statement (if requested) |
| <input type="checkbox"/> Accounts Payable Aging | <input type="checkbox"/> Copy of Applicant(s)' Drivers License(s) |

Notes:

SIGNATURE & AUTHORIZATION

I understand that the submission of this application to Riviera Finance (hereinafter Riviera) indicates my intention to enter into a Security Agreement with Riviera but does not obligate Riviera to factor/finance or provide any financial services whatsoever. I further acknowledge that the approval to factor/finance or provide any financial services may come only after the manager of Riviera approves said application and the invoices/accounts offered, in accordance with the terms of Riviera's Security Agreement. The above statements are true and correct to the best of my information and belief. This serves as my permission for the release of any information to Riviera regarding this application for the purpose of credit investigation. I hereby authorize Riviera to investigate the credit of all parties listed above. I also herein authorize Riviera to contact our customers to verify the invoices submitted for factoring.

Signed: _____ Date: _____ Name and Title: _____

Signed: _____ Date: _____ Name and Title: _____