

Corporate Capital Funding

MEDICAL PRACTICE REFINANCING

DOCUMENTS REQUIRED:

Required	Received	
<input type="checkbox"/>	<input type="checkbox"/>	Commercial Application- Please complete all information requested
<input type="checkbox"/>	<input type="checkbox"/>	How much do you need to finance & what repayment terms are desirable?
<input type="checkbox"/>	<input type="checkbox"/>	Detailed breakdown of existing financing, including lender information, present loan balance and assets financed
<input type="checkbox"/>	<input type="checkbox"/>	Interim Financial Information (If it has been ninety (90) days since the last financial statement or tax returns)
<input type="checkbox"/>	<input type="checkbox"/>	Corporate Financial Statement or Corporate Tax Returns, for the last 3 years
<input type="checkbox"/>	<input type="checkbox"/>	Personal Financial Statement of Principal(s)
<input type="checkbox"/>	<input type="checkbox"/>	Personal Tax Return of Principal(s), for the last 3 years- If the practice is a Sole Proprietorship
<input type="checkbox"/>	<input type="checkbox"/>	Copy of the Medical License for the Physician

The required documentation may vary due to the amount and circumstances of the transactions. If you have any immediate questions please don't hesitate [to call our office at 410-371-9753](tel:410-371-9753)