Business Narrative Form

ITIN Self-Employed

VICTORY WHOLESALE LOANS

1. Name of business: _____
2. Number of owners: _____
3. Service or Product provided: _____
4. Date business started: _____
5. Business legal structure:
   ☐ Partnership ☐ Corporation ☐ Sub-S Corporation ☐ Limited Liability Company
6. Business location: (insert address of primary location) _____
   A. Is the space a ☐ residence or ☐ commercial/warehouse?
7. Number of business locations: ☐ one ☐ 2-5 ☐ greater than 5
8. Are these locations ☐ owned or ☐ leased?
9. Number of employees: ☐ 0-5 ☐ 6-10 ☐ 11-25 ☐ greater than 25 – describe: _____
10. Any machinery or equipment required for business operations: _____
11. Does the business require inventory (raw material or finished goods) to generate sales? ☐ Yes ☐ No
    A. If yes, describe the inventory and turnover ratio: _____

Date	Email & Phone No.
Title	**Signature**

*can be completed by the borrower(s)

Champions Funding, LLC, DBA Victory Wholesale Loans. NMLS ID #2254210. Equal Housing Opportunity.