NTIB Finance & Consulting
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BUSINESS DEBT SCHEDULE

Required for most financing applications

BUSINESS INFORMATION

Business Name	Contact Name	Date	EIN / Tax ID

Email Address	Phone	Prepared For (Lender / Application #)

DEBT SCHEDULE

CREDITOR / LENDER	ORIGINAL BALANCE	CURRENT BALANCE	MONTHLY PAYMENT	RATE %	MATURITY DATE	COLLATERAL / NOTES
TOTALS						

CERTIFICATION & SIGNATURE

I certify that the information provided in this debt schedule is true and accurate to the best of my knowledge and belief.

Printed Name	Title / Position	Date

Signature (sign above in ink)

Umergence LLC is a registered broker-dealer, member FINRA/SIPC. This form is for use in connection with a financing application.