



4539 Metropolitan Court,
Frederick MD, 21704
Tel: (301) 360-3521
Fax: (240) 536-9199

info@gtdcinc.com
www.gtdcinc.com

U.S.A | Ethiopia | Italy | Saudi Arabia | South Africa | South Sudan

Client Evaluation Form

Please Note - before you fill out this form, we would like you to be aware of the following:

- It is required that your company's previous year revenue be at least one third of the amount of capital sought. For example, if you are seeking to finance your project with 10 million dollars, then your verifiable revenue for the previous year should be 3.3 million dollars or more*.
- Once we retain you as a client, there are associated processing fees to cover part of the cost for legal, accounting, research, analysis, presentation, investment documentation, portfolio packaging, proprietary modeling, and negotiations with lenders. The fees vary depending on the complexity of the project and are non-refundable to cover part of our cost. Visit www.gtdcinc.com/clientprocess.html for more information.

Company Information

Name of company	
Headquarters	
Countries in which it operates	
Line or lines of business-description	
Website (if available)	

Project Information

Project name	
Goal, objectives and purpose of project	

Contact Information

Contact person	
Title	
Phone Number	
Email address	

Revenue Information

Revenues for previous 3 years*	Previous year 1:
	Previous year 2:
	Previous year3:
Revenue forecast for current and next 2 years	Current year:
	Year 1:
	Year 2:

Financing Information

Amount of capital sought		
Type of capital sought (please check all that apply)	<input type="checkbox"/> Short –term loan	<input type="checkbox"/> Long –term loan
	<input type="checkbox"/> Equity financing	<input type="checkbox"/> Loan and equity financing
	<input type="checkbox"/> Equipment financing	<input type="checkbox"/> Other (please specify)

Other information/comment	
----------------------------------	--