

LOAN APPLICATION

Please fill in the spaces below, sign and mail or fax us the application. By doing so, you are giving us as well as its agents & affiliates, permission to review your business and personal credit history in order to provide you with formal funding approval.

Business Legal Name:		Business DBA Name:	
Address: Suite / Floor:		City:	State: Zip:
Phone:	Fax:	Mobile:	Tax ID #: State of Incorporation:
Business Start Date (month / year): Length of Ownership:		Legal Entity: <input type="checkbox"/> Corp <input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership Industry Type:	
E-mail:		Website:	
Landlord / Mortgage Company:		Rent <input type="checkbox"/> Mortgage <input type="checkbox"/> Payment:	Lease Expiration:
Landlord Contact Name:		Landlord Contact Phone:	Landlord Contact Fax:
REFERENCE	Company Name:	Contact:	Telephone:
	Company Name:	Contact:	Telephone:
	Company Name:	Contact:	Telephone:
PRINCIPAL / OWNER DETAILS			
Principal (1) Name: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs		Title:	% Ownership:
Address:		City:	State: Zip:
Phone:	Fax:	Mobile:	Social Security #:
Annual Income:		Driver's License #:	Date of Birth:
E-mail:		SIGNATURE:	DATE:
Principal (2) Name: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs		Title:	% Ownership:
Address:		City:	State: Zip:
Phone:	Fax:	Mobile:	Social Security #:
Annual Income:		Driver's License #:	Date of Birth:
E-mail:		SIGNATURE:	DATE:
FUNDING DETAILS			
Desired Advance Amount:		Minimum Advance Amount:	Average Ticket Size:
Average Monthly Visa/MasterCard Sales:		Average Monthly Total Sales:	
Proposed Use of Funds:		Current Processing Company:	
Gross Annual Sales:		Number of Locations:	Business for Sale:
Number of Terminals:		Terminal Type:	Credit Card Terminal Swiped Percentage:
Have you used a cash advance before?: <input type="checkbox"/> YES <input type="checkbox"/> NO		Have you been in bankruptcy, if so discharge date?: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Do you have an OPEN cash advance?: <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, with who: Balance:		Do you have suits/judgments/liens pending?: <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, what is the balance:	

Client's Name: _____

Signature: _____

Date: _____