



Funding Application

Email:

Phone:

Fax:

Company Information

Legal Company Name:		Legal Entity:	
DBA (if applicable):		<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership	
Date Business Started:		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other: _____	
Federal Tax ID:		Company Website:	
Industry and Products Sold:		State of Incorporation:	
Company Physical Address:		City:	
State:	Zip:	Phone Number:	

Company Financial Profile

Gross Annual Revenue:	Average Daily Bank Balance:	
Requested Funding Amount:	Use of Proceeds:	
Does Company Rent or Own: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment - Rent/Mortgage:	
Landlord/Mortgage Company Phone:	Landlord/Mortgage Company Name:	
Does company have outstanding business funding? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , identify funder and balances below ↓		
Company: Balance:	Company: Balance:	Company: Balance:

Owner Information (1)

Full Name:
Ownership Share:
Years as Owner:
Email:
Home Phone:
Cell Phone:
SSN:
Date of Birth:
Home Address:

Owner Information (2)

Full Name:
Ownership Share:
Years as Owner:
Email:
Home Phone:
Cell Phone:
SSN:
Date of Birth:
Home Address:

You understand that this application is used for informational and application purposes only and does not create an agreement to fund you or your Company (identified above). By signing below, you certify and confirm the following: (i) you are authorized to apply for funding on behalf of the Company, and (2) all information provided herein together with supporting documents is true, accurate and complete. By signing, you agree to immediately notify AveFunding of any changes to this information. You understand and agree that AveFunding and our agents and assignees are authorized to contact third parties to make inquiries in evaluating your application (including requesting Company and personal credit bureau reports from credit reporting agencies and other sources) or for any updates and renewals.

Signature:	Date:	Signature:	Date:
_____	_____	_____	_____