

Application

Business Infor	mation			_{Loan} C	MCA Either	
Legal Business Name (Business Applicant)			DBA Name			
Street Address			Business Phone Business Fax			
City			Email Address			
State		Zip	Business Open Date (Mth/Yr)			
Time Remaining on	Lease/Mort.		Landlord / Agent Name			
No. of Locations		Type of Business Landlord / Age		ent Phone		
Financial Infor	mation					
 Federal Tax ID Number (9 Digits)		Have you ever filed for bankruptcy?		Current Processor		
Intended Use of Funds		Time with Current Processor		Number of Terminals at Location / Terminal Type		
Requested Advance of Funds		Estimated Total Monthly Sales		Merchant Account Number		
Is your business for sale?		Avg. Monthly Volume Credit (g. Monthly Volume Credit Cards		Do you have federal or state tax liens?	
Is it under a payment plan? If yes, how long have you been			n in a payment plan?	ayment plan? What is the balance on your tax lien?		
Principal Owne	er Informatio	on #1	Principal Owr	ner Informati	on #2	
Principal Owner Name		Social Security Number	Principal Owner N	lame	Social Security Number	
Home Address		Date of Birth (00/00/0000)	Home Street Addı	ress	Date of Birth (00/00/0000)	
City		% Ownership?	City		% Ownership?	
State	Zip	Cell Phone	State	Zip	Cell Phone	
provided by the Busines their affiliates (collective and make any inquiries RapidAdvance's experier account information as EACH SIGNER ACKNOWLE INFORMATION MAY BE INHEREBY AGREES TO NOT TERMS OF THIS APPLICA	ss Applicant and ti ely "RapidAdvance RapidAdvance con nce with the Appli required by law." EDGES THAT RAPIDA NCORPORATED BY R TIFY RAPIDADVANCI ATION, INCLUDING	ne Principal is true and complete and an an it is 1) obtain credit and employment asiders appropriate in connection with the cant's account and information about the Each signer acknowledges that additional ADVANCE MAY RELY ON THE STATEMENTS AREFERENCE IN ANY AGREEMENT ANY OF THE PROMPTLY OF ANY CHANGE IN ANY SUKANY ADDENDUM, AND REPRESENTS AND	uthorizes Small Business information about the his Application or revieus Application available il information may be il ND INFORMATION SET FOR E UNDERSIGNED MAY ENCH STATEMENT OR INFO DO WARRANTS THAT THE	s Financial Solutions Business Applicant ws of the Applicant to credit bureaus or required in order to ORTH IN THIS APPLIC JUTER INTO WITH RAP REMATION. EACH SIG INFORMATION CON	t and Principal; 2) obtain credit reports t's account from time to time; 3) make or the Principal owners, and 4) disclose o render a decision on this application. CATION AND THAT SUCH STATEMENTS AND PIDADVANCE. EACH OF THE UNDERSIGNED GNER HAS READ AND UNDERSTANDS THE NTAINED HEREIN IS TRUE AND CORRECT.	
religion, national origin, derives from any public a	sex, marital status ssistance program;	ederal Equal Credit Opportunity Act prohi , age (provided the applicant has the cap or because the applicant has in good faith ning this Small Business Financial Solutions	acity to enter into a bin exercised any right unde	iding contract); beca er the Consumer Cred	ause all or part of the applicant's income dit Protection Act. The federal agency that	
Ву:	(-:	Title:	Print Name:		Date:	
Owner #1:	(signature)	Print Nam	e:		Date:	
Owner #2:	(alguature)		e:		Date:	
FOR PARTNER L	JSE ONLY -	(signature) FOR PARTNER USE ONLY -	FOR PARTNER	USE ONLY -	FOR PARTNER USE ONLY	
Manaka 115		Double on Nove	Davitus C. I. C.	- Name	Courte et Nivus I	
Merchant ID		Partner Name	Partner Sales Persor	n Name	Contact Number	