

Merchant Pre-Qualification Form

Business Legal Name:

Business DBA Name:

Type of Business Entity (Check One) ☐ Corporation ☐ Limited Liability Company ☐ Partnership ☐ Limited Partnership ☐ Limited Liability Partnership ☐ Sole Proprietor

Does the Merchant have any other businesses with current AdvanceMe contracts? Check one ☐ YES ☐ NO

State of Incorporation:

Use of Proceeds:

Physical Street Address:

City:

State:

Zip Code:

Billing Street Address (If different than above):

City:

State:

Zip Code:

Physical Location Phone #:

Billing Location Phone #:

Preferred Contact Phone #:

Industry Type: (SIC Code or Description)

☐ Rented ☐ Mortgaged Amount:

Current Credit Card Processor:

Gross Annual Sales (Previous year's Tax return):

Date the Business first processed Credit Cards under current Ownership/Business Start Date:

Average Monthly Credit Card Volume:

List the total VISA/MasterCard processing volumes from previous four months:

Last Month:

Two Months Ago:

Three Months Ago:

Four Months Ago:

\$ # Tickets:

\$ # Tickets:

\$ # Tickets:

\$ # Tickets:

Owner/Officer

Primary Contact ☐

Job Title:

Last Name:

First Name:

SS#:

Date of Birth:

Home Phone:

Street Address:

City:

State:

Zip Code:

Authorizations

Capital Access Network, Inc. ("CAN") is the parent of AdvanceMe, Inc. ("AMI") and NewLogic Business Loans, Inc. ("NLBL") (collectively, the "CAN Companies"). Each of the CAN Companies offers certain financial products to businesses, and CAN provides certain services to the CAN Companies in connection therewith, including gathering information from applicants and third parties, including credit bureaus, and transmitting such information to the CAN Companies as agent on behalf of the CAN Companies. By signing below, the above listed business ("Merchant") and Owner(s) / Officer(s) (collectively hereafter "Applicants") request that AMI or NLBL as applicable evaluate whether Merchant pre-qualifies for the financial product(s) requested by Merchant, as well as any other financial products offered by either AMI or NLBL for which the Merchant pre-qualifies. Applicants represent that the information contained on this Merchant Pre-Qualification Form and the credit card processor statements provided to CAN and/or any of the CAN companies are true and correct, and Applicants will immediately notify CAN of any financial change in Applicants. Applicants hereby authorize CAN as agent on behalf of each of the CAN Companies (1) to obtain on any of the Applicants any investigative reports, credit reports (business and personal), statements from creditors or financial institutions, verification of information provided by any of the Applicants, or any other information (collectively "Applicant Information") that the CAN Companies, or either of them, deem necessary or desirable in connection with the evaluations and (2) to transmit this Merchant Pre-Qualification Form, the credit card processor statements and Applicant Information to one or both of the CAN Companies. Applicants also here authorize each of the CAN Companies, acting on its own behalf, to take any one or more of the actions described in part (1) of the immediately preceding sentence. Applicants hereby authorize the release by any creditor or financial institution to CAN, as agent on behalf of the CAN Companies, and to each of the CAN Companies on its own behalf of any information relating to any of the Applicants. Applicants waive and release any claims against CAN, either of the CAN Companies or any creditor, credit bureau or financial institution arising from any act or omission relating to the obtaining or release of information sought by CAN or the CAN Companies. **Applicants agree that any pre-qualified terms communicated by or on behalf of CAN and one or more of the CAN Companies are confidential and may not be disclosed to third parties (other than to Applicants' legal or financial advisors or as required by law), except at CAN's express, written direction as agent on behalf of one or more of the CAN Companies.**

Owner / Officer's Name: (Print)

Owner / Officer's Signature:

X

Date:

Sales Information (To be completed by Sales Representative)

Sales Rep #:

Sales Rep Name :

Sales Rep Contact #:

Additional Contact #:

E-Mail Address :

Requested working capital amount: \$

Merchant email address:

Note: