

Additional Information for Funding

Business Details

LEGAL NAME ("MERCHANT")	DBA NAME
STREET ADDRESS	SUITE / FLOOR
CITY, STATE, ZIP	FEDERAL / STATE TAX ID
MAIN PHONE NUMBER	BUSINESS START DATE
WEBSITE	GROSS ANNUAL SALES
ENTITY TYPE	LEASE OR MORTGAGE
STATE OF INCORPORATION	LEASE / MORTGAGE PAYMENT
BUSINESS LOCATION TYPE	LANDLORD / LENDER NAME
AVERAGE MONTHLY CREDIT CARD SALES	LANDLORD / LENDER CONTACT (PHONE OR EMAIL)
AMOUNT REQUESTED	PURPOSE OF FINANCING

Owner Details (First Owner/Officer)

NAME	TITLE
STREET ADDRESS	CITY, STATE, ZIP
PHONE NUMBER	PERCENTAGE OF OWNERSHIP
DATE OF BIRTH	SOCIAL SECURITY NUMBER

Owner Details (Second Owner/Officer - *if applicable*)

NAME	TITLE
STREET ADDRESS	CITY, STATE, ZIP
PHONE NUMBER	PERCENTAGE OF OWNERSHIP
DATE OF BIRTH	SOCIAL SECURITY NUMBER

First Owner/Officer

NAME _____

SIGNATURE _____

DATE _____

Second Owner/Officer - *if applicable*

NAME _____

SIGNATURE _____

DATE _____