

## Business Funding Application

Please fill in ALL fields below. By doing so, you are giving Cash 4 biz, as well as its agents and affiliates, permission to review your business and personal history in order to provide you with formal approval.

## Business Information

|   |  |
|---|--|
| <b>Business Legal Name:</b> _____   | <b>Business DBA Name:</b> _____  |
| <b>Address:</b> _____   | <b>Suite/Floor:</b> _____  |
| <b>City:</b> _____  | <b>State:</b> _____ <b>Zip:</b> _____  |
| <b>Work Phone:</b> _____  | <b>Cell Phone:</b> _____   |
| <b>Fax Phone:</b> _____   | <b>Website:</b> _____  |
| <b>Email:</b> _____   | <b>Federal State Tax#:</b> _____   |
| <b>Business Start Date:</b> _____   | <b>Entity:</b> <input type="checkbox"/> Corp <input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership  |
| <b>Type:</b> <input type="checkbox"/> Retail <input type="checkbox"/> Restaurant <input type="checkbox"/> Service <input type="checkbox"/> Internet | <b>Location:</b> <input type="checkbox"/> Store Front <input type="checkbox"/> Office <input type="checkbox"/> Home <input type="checkbox"/> Other |
| <b>Landlord Name &amp; Phone:</b> _____   | <b>Rent/Mortgage Amount:</b> _____   |
| <b>Products/Service Sold:</b> _____   | <b>Reason For Funding:</b> _____   |

## Financial Information

|  |   |
|--|---|
| <b>Avg Gross Monthly Sales:</b> _____  | <b>Avg Monthly Credit Card Sales:</b> _____   |
| <b>How much do you need to borrow:</b> _____   | <b>Do You Have An Open Bankruptcy:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Do You Have An Open Tax Lien:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No        | <b>Are You On A Payment Plan:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No      |
| <b>Have You Used A Cash Advance Before:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No | <b>If Yes, Who:</b> _____ <b>How Much:</b> _____  |
| <b>When Was It Taken Out?</b> _____  | <b>Current Balance:</b> _____   |

## Owner/Principal Information

|   |   |
|---|---|
| <b>Owner Name:</b> _____                  | <b>Co-Owner Name:</b> _____               |
| <b>Address:</b> _____                     | <b>Address:</b> _____                     |
| <b>City, State, Zip:</b> _____            | <b>City, State, Zip:</b> _____            |
| <b>Phone:</b> _____                       | <b>Phone:</b> _____                       |
| <b>Email:</b> _____                       | <b>Email:</b> _____                       |
| <b>% Ownership:</b> _____                 | <b>% Ownership:</b> _____                 |
| <b>Date Of Birth:</b> _____               | <b>Date Of Birth:</b> _____               |
| <b>SSN#:</b> _____ <b>Driver #:</b> _____ | <b>SSN#:</b> _____ <b>Driver #:</b> _____ |

**Please Date:** \_\_\_\_\_

By signing below the Merchant and its Owners/principals: (1) certify that all information and documents submitted in connection with this Application is true, correct and complete; and (2) authorize Cash 4 biz, partners, and lenders to receive credit reports and any other information regarding the Merchant and its Owners and principals from third parties, to verify any information provided on the Application.

**Borrower:** \_\_\_\_\_ **Co-Borrower:** \_\_\_\_\_

**Please Fax Back Completed Form to 949-461-1481 or scan and Email to info@cash4biz.biz**