



# Request for Documents

Thank you for considering RGI Funding for your lending needs. To complete your offer for a Working Capital Loan we will need the following.

1. Complete basic application attached bellow.
2. Return completed application with your last 4 months Business Bank Statements
3. Last 4 Months Credit Card Processing Statements (If applicable)
4. If you currently have more then one Advance or Term Loan, complete the Additional Loan Information section below.

Please send all documents to [info@rgifunding.com](mailto:info@rgifunding.com)

## Additional Loan Information

Lender Name.	Original Funded Amount.	Current Balance.
Lender Name.	Original Funded Amount.	Current Balance.
Lender Name.	Original Funded Amount.	Current Balance.
Lender Name.	Original Funded Amount.	Current Balance.

Please allow 24 hours for a decision.

Thank you again for choosing RGI Funding,

RGI Funding  
1-888-293-4811  
[www.RGIFunding.com](http://www.RGIFunding.com)



# Funding Application

All information on this form is required unless otherwise noted.

## Business Contact Information

Authorized Business Name.		Business DBA Name.		Date Business Started.	
Authorized Business Address.			City.	ST.	Zip Code
Federal Tax ID EIN#		Years in Business	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC/Corporation
<input type="checkbox"/> State Incorporated	Business Phone.	Business Fax.	Website.		
Industry/Product/Service.		Business Email.		Business Lease Exportation Date.	
Business Property Lease Owner Name	Lease Owner Phone.	# of Locations	# of Owners	% of Ownership	

## Owner Contact Information

Principle Business Owner Full Legal Name. (First/Middle/Last)		Date Of Birth.	SSN#.	
Principle Home Address.			City.	ST. Zip Code
Driver License #	Email.	Phone.	Mobile #.	

## Owner Contact Information

Average Monthly Gross Deposits	Average Monthly Credit Card Sales	Last Year Total Gross Sales	
Loan Amount Requesting	Do you have any Advances or Term Loans now? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Lender Name.	Original Funded Amount.	Current Balance.	
Daily/Weekly/Monthly Repayment Amount	Is your business Seasonal? <input type="checkbox"/> Yes <input type="checkbox"/> No		

By signing below, the merchant and its owners/principals (1) certify that all information and documents submitted in connection with this application are true correct and complete: and (2) authorize Right Group Funding, its agents, partners and lenders to receive credit reports and other information regarding the Merchant and its owners and principals from third parties, to verify any information provided on the application.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature of Principle Owner.	Titles of Principle.	Date.