<b>Business Information</b>									
Business Legal Name	:								
Doing Business As	:								
Legal Entity (LLC, Corp, Sole Prop	ρ):								
Federal Tax ID	:			Busine	ss Start	Date:			
Business Phone	:				Business Fax Number:				
Business Website	:								
Business Address	:								
Owner/Principal Information									
Name:									
Date of Birth:				SSN:					
Mobile (Phone)		% of Owr							
Email Address:									
Address:									
2 <sup>nd</sup> Owner/Principal Information									
Name:									
Date of Birth:				SSN:					
Mobile (Phone)					% of Ownership				
Email Address:									
Address:									
Funding Information									
Business Description:									
Amount Requested:	•		Use of F	roceeds:					
Credit Score:	499 or below		500-599	(	00-649	65	0-679	680 or above	
Total Monthly Sales (A	All Forms of Reve	nue):							
Which is most important to you?			Amount of F	unds	inds Speed of Funds Cost of Fund			Cost of Funds	
Do you currently have a cash advance? If yes,									
what is your current outstanding balance?									
By signing below, the merchant and its owners / principles: (1) certify that all information and documents submitted in connection with this application is tru correct, and complete; (2) authorize Lexington Capital Holdings its agents, partners, and lenders to pull credit reports and any other information provided on the application; and (3) to receive an occasional promotion or offer by email or fax.  By signing below, each of the undersigned individual(s) who is either a documents submitted in connection with this application is true, correct and complete. Further, you authorize Lexington Capital Holdings Corp. ("Lexington") and each of its representatives, successors, assigns, designees and third-party funding partners, which includes lenders and other finance providers with whom Lexington has, or may in the future enter into, commercial-brokerage-financing relationships (collectively, "Recipients"): (1) to request and receive any consumer, business and/or investigative reports about or of you, from one or more consumer and/or business reporting agencies, including but not limited to credit card processor statements and bank statements; (3) to transmit this form, along with any of the foregoing information obtained in connection with respect to this application and/or future-related commercial-financing opportunities.									
Owner Signature:				Owner Signature:					
Print Name:				Print Name:					
Date:				Date:					