

# LJB Funding

## Associates

<p><i>For LJB Use Only:</i>  Agent Name:  Contact #:  Fax #:</p> <p><b>**Pre-Qualification Form</b></p>
---

Equipment Financing \_\_\_\_\_ Business Working Capital \_\_\_\_\_

<b>Business Legal Name:</b>			<b>Business DBA Name:</b>		
<b>Type of Business Entity</b> <i>(Check One)</i>	Corporation	Limited Liability Company		Sole Proprietor	
	Partnership	Limited Liability Partnership		Limited Partnership	
<b>Does the Merchant have any other open contracts for capital?</b>	YES NO	<b>State of Incorporation:</b>	<b>Use of Proceeds:</b>		
<b>Physical Street Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>	
<b>Billing Street Address (if different than above):</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>	
<b>Physical Location Phone #:</b>	<b>Billing Location Phone #:</b>		<b>Preferred Contact Phone Number:</b>		
<b>Industry Type (SIC Code or Description)</b>	<b>Amount: \$</b>	<b>Rent</b>	<b>Mortgage</b>	<b>Current Credit Card Processor:</b>	
<b>Gross Annual Sales:</b> <i>(Previous year's tax return):</i>	<b>Business Start Date:</b> <i>(under current ownership):</i>		<b>Average Monthly Credit Card Volume:</b>		
<b>Principal/Owner 1</b>	<b>% Ownership:</b>	<b>Primary Contact:</b>		<b>Official Title:</b>	
<b>Legal Last Name:</b>	<b>Legal First Name:</b>	<b>SSN:</b>	<b>Date of Birth:</b>	<b>Home Phone:</b>	
<b>Home Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>	<b>Own</b> <b>Rent</b>
<b>Principal/Owner 2</b>	<b>% Ownership:</b>	<b>Primary Contact:</b>		<b>Official Title:</b>	
<b>Legal Last Name:</b>	<b>Legal First Name:</b>	<b>SSN:</b>	<b>Date of Birth:</b>	<b>Home Phone:</b>	
<b>Home Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>	<b>Own</b> <b>Rent</b>

### Authorizations

The Merchant and Owner(s)/Officer(s) identified above (individually, an "Applicant") each represents, acknowledges and agrees that (1) all information and documents provided to LJB Funding Associates ("LJB") including credit card processor statements are true, accurate and complete, (2) Applicant will immediately notify LJB Funding Associates of any change in such information or financial condition, (3) Applicant authorizes LJB to disclose all information and documents that LJB may obtain including credit reports to other persons or entities (collectively, "Assignees") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transactions, including without limitation the application there for (collectively, "Transactions") and each Assignee is authorized to use such information and documents, and share such information and documents with other Assignees, in connection with potential Transactions, (4) each Assignee will rely upon the accuracy and completeness of such information and documents, (5) LJB, Assignees, and each of their representatives, successors, assigns and designees (collectively, "Recipients") are authorized to request and receive any investigative reports, credit reports, statements from creditors or financial institutions, verification of information, or any other information that a Recipient deems necessary, (6) Applicant waives and releases any claims against Recipients and any information-providers arising from any act or omission relating to the requesting, receiving or release of information, and (7) each Owner/Officer represents that he or she is authorized to sign this form on behalf of Merchant.

<b>Current Advance/Loan Balance \$</b>		<b>Name of Financing Company:</b>	
<b>Cell #:</b>	<b>Fax #:</b>	<b>Email:</b>	
<b>Website:</b>	<b>Landlord/Mtg Name:</b>	<b>Landlord/Mtg Contact #:</b>	
<b>Business Federal Tax ID #:</b>		<b>Amount Requested:</b>	

**Principal 1 Print Name:**

**Principal 1 Signature:**

**Date:**

**Principal 2 Print Name:**

**Principal 2 Signature:**

**Date:**