



## Business Term Loan

① Company Information   ② Owner Information   ③ Upload Files

**GoKapital, Inc.**

2150 Coral Way, Suite 1 Miami, FL 33145

Questions? Call [1-866-257-2973](tel:1-866-257-2973)

[apply@gokapital.com](mailto:apply@gokapital.com) | [www.GoKapital.com](http://www.GoKapital.com)

**Sales Agent:**

### Company Information:

**Legal Company Name (& DBA): \***

**Legal Entity: \***

☐ LLC   ☐ Corporation   ☐ Sole Prop.

**Website:**

**Industry:**

**Incorporation State: \***

**Tax ID: \***

XX-XXXXXXX format

**Business Address: \***

**Average Monthly Revenue: \*****Business Telephone #: \*****Business Start Date: \****Minimum Time In Business 3 Months***Use of Funds: \*****Requested Financing Amount: \*****Existing Business Loan/Advance:**☐ Yes ☐ No**Do you Own or Rent Location:**☐ Rent ☐ Own**Monthly Rent/Mortgage:****Landlord/Bank Name:****Landlord Phone:****Next >****Save**