

Business Funding Application

A. BUSINESS INFORMATION				
Legal/corporate name:		DBA:		
Physical address:		City:	State:	Zip:
Business phone:	Fax:		Federal tax ID:	
Contact:	E-mail:		Website:	
Date business started:	Length of ownership:	Years at location:	# of locations:	
B. OWNERSHIP *(must have at least 67% ownership, if NOT, add additional owners on additional applications)				
Name:		Contact phone number:		
Home address:		City:	State:	Zip:
Date of birth:	SSN:			
% Ownership of company:	* Must have at least 67% ownership		Title:	
C. BUSINESS PROFILE				
Ownership: ☐ Sole proprietorship ☐ Corporation ☐ Partnership ☐ LLC		Merchant type: ☐ Retail ☐ Restaurant ☐ Lodging ☐ Service ☐ Internet ☐ Home-based ☐ Automotive ☐ Other _____		
D. CASH ADVANCE - LOAN QUESTIONS				
Amount requested: (We provide up to 2 times a companies gross monthly bank revenue).		Have you used a cash advance plan before?		
Average Visa/MasterCard monthly sales:		If so, what company did you use?		
Average gross monthly sales:		Original Balance:	Current Balance? (Provide Original Contract)	
		Current payment or daily holdback%		

E. SIGNATURE	
By signing below, the Merchant and its owners/principals: (1) certify that all information on and documents submitted in connection with this Application are true, correct, and complete; and (2) authorize M&P, its agents, partners, and lenders to receive credit reports and any other information regarding the Merchant and its owners/principals from third parties, in order to verify any information provided on the Application.	
Signature:	Date: