



David Hutchinson dave@myezcapital.com 410-847-7007

Company Information

Company Name		D/B/A		
<input type="text"/>		<input type="text"/>		
Entity Type	State of Incorporation	Taxpayer ID Number	Business Inception Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	City	State	Zip Code	Industry Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Business Phone	Gross Annual Revenue	Requested Funding Amount	Use of Funds	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Owners Information

Full Name	Email	Phone Number	Date of Birth	Ownership %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	City	State	Zip Code	SSN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Co - Owners Information (If Applicable)

Full Name	Email	Phone Number	Date of Birth	Ownership %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	City	State	Zip Code	SSN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DISCLOSURE By signing below, each of the above listed business and business owner/officer (individually and collectively, "you") authorize My EZ Capital and each of its representatives, successors, assigns and designees ("Recipients") 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 therefor (collectively, "Transactions") to obtain consumer and/or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize My EZ Capital to transmit this application form, with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to My EZ Capital, and to each of the Recipients, on its own behalf. I am providing my business phone and business e-mail address and hereby consent to the receipt of correspondence/messages regarding transactions with My EZ Capital, and/or its affiliates on either medium. I also hereby consent to the receipt of text messages knowing that msg. and data rates may apply. I understand that consent to receive texts is not a condition of approval. I can expect approx. 10 messages each month. I/we certify that all the information contained herein is complete, true and accurate.

Signature

Date