



# Business Funding Pre-Qualification Request

please email completed prequalification request to [submissions@theveritas.group](mailto:submissions@theveritas.group)

## ! IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING AN ACCOUNT

In connection with opening an account, we will ask for and retain your name, address, date of birth and other information that will allow us to identify and verify you. We also may ask to see your driver's license or other identifying documents. If required by Federal law, we may report this information to government agencies to help fight the funding of terrorism and money laundering activities.

### Business Information

Legal / Corporate Name: \_\_\_\_\_ DBA: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Website: \_\_\_\_\_

Date Business Started: \_\_\_\_\_ Length Of Ownership: \_\_\_\_\_ Years At Location: \_\_\_\_\_ # Of Locations: \_\_\_\_\_

### Ownership

Owner Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ SSN: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

% Of Ownership: \_\_\_\_\_

Co Owner Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ SSN: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

% Of Ownership: \_\_\_\_\_

### Lease

Landlord Name / Contact: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

### Business Profile

Ownership:	Merchant Type:	Cards Accepted:
Sole Proprietorship	Retail	Discover
Corporation	Lodging	MasterCard
Partnership	Internet	American Express
LLC	Automotive	PIN - Based Debit
	Restaurant	
	Service	
	Home-Based	
	Wholesale	
	SIC Code:	
	Other:	

### Existing Business Financing

Do you have existing business financing? If so, company: \_\_\_\_\_

Original Balance: \_\_\_\_\_ Current Balance: \_\_\_\_\_

### Business Revenue

Current Processing Company: \_\_\_\_\_ # Of Terminals: \_\_\_\_\_

Highest Volume Months: Jan Feb Mar Jun Jul Aug Sept Oct Nov Dec

Average Gross Monthly Sales: \_\_\_\_\_ Average Ticket Size: \_\_\_\_\_ Average Visa/MasterCard Monthly Sales: \_\_\_\_\_

### Other Information

Is business seasonal or closed during part of the year? If so, details: \_\_\_\_\_

Is business for sale? If so, details: \_\_\_\_\_

Any open state/federal tax liens against business or owner? If so, details: \_\_\_\_\_

Any lawsuits or judgements pending against business or owner? If so, details: \_\_\_\_\_

Authorization to Contact You By Phone: You authorize us, and our affiliates, agents, and independent contractors, to contact you at any telephone number you provide to us or from which you place a call to us, or any telephone number where we believe we may reach you, using any means of communication, including, but not limited to calls or text messages to mobile, cellular, wireless or similar devices and calls or text messages using an automated telephone dialing system and/or artificial voices or prerecorded messages, even if you incur charges for receiving such communications.

Authorization to Contact You By Other Means: You also agree that we and our affiliates, agents and independent contractors may use any other medium, as permitted by law and including, but not limited to, mail, email and facsimile, to contact you.

### Signature and Authorization to Obtain Information

By signing below, the Merchant and its owners/principals each: (1) certify that all information and documents submitted in connection with this Prequalification Request are true, correct and complete. (2) acknowledge that the owners/principals are personally liable for Merchant. (3) provide authorization and 'written instruction' to Credibly under the Fair Credit Reporting Act to obtain information from your personal and/or business credit profile as well as additional information from credit bureaus and other sources. This authorization and written instruction is to obtain information solely to conduct a prequalification for business funding, verify provided information and report fraud transactions. If you are requesting on line, clicking ' I AGREE ' shall be written instructions with the same effect as your signature

Owner Signature \_\_\_\_\_ Date \_\_\_\_\_ Co Owner Signature \_\_\_\_\_ Date \_\_\_\_\_