



Merchant Application

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General Background: Merchant Information						
Type of Entity	Corporation	LLC	Partnership	Limited Partnership	Limited Liability Partnership	Sole Prop
Merchants Legal Name				DBA		Federal ID (SSN for Sole Prop)
Physical Address				City, State, Zip		Business Phone
State of Incorporation/Organization		Business Type; Product/Service Sold		Length of Ownership	Business Start Date (mm/yy)	
Website Address				Business Email Address		
Merchant Ownership Information : Owner No. 1 Percentage (_____ % of Ownership)						
Name		Social Security Number		Date of Birth	Position	
Driver's License # & State		Home Phone Number		Cell Phone #:	Personal Email Address	
Residence Address				City, State, Zip		
Merchant Ownership Information: Owner No. 2 Percentage (_____ % of Ownership)						
Name		Social Security Number		Date of Birth	Position	
Driver's License # & State		Home Phone Number		Cell Phone #	Personal Email Address	
Residence Address				City, State, Zip		
Sales & Credit Card Processing Information						
Avg. Gross Monthly Volume (Cash, Checks, Credit Cards):						
Credit Card Processor				Phone Number		
Funding Information						
Do you have an open loan or merchant cash advance balance			YES	NO	If yes, company and current balance	
Have you used a loan or merchant cash advance program			YES	NO	If yes, company	
Is there an outstanding loan to a previous business owner			YES	NO	If yes, payment terms	
Any state/federal tax liens against owner			YES	NO	If yes, details	
Have you or business ever declared bankruptcy			YES	NO	If yes, details	
Are any suits or judgments pending			YES	NO	If yes, details	
Business Property Information						
Own/Lease	Lease Start Date	Lease Term		Monthly Rent/Mtg	Square Footage (approx.)	
Landlord/ Mortgage Company		Contact Name		Phone Number		

By signing below, each of the above listed Business Owner(s)/Officer(s)/Principal(s) and Business (individually and collectively, "You") certify that all information and documents submitted in connection with this Funding Application ("Application") are accurate, true, correct and complete; and that You will immediately notify Bestline Business Funding or any of its representatives, successors, assigns, designees, agents, partners or affiliates ("Recipients") of any change in such information or financial condition. You acknowledge that any false statements may be considered fraud. You acknowledge that the Recipients are relying on the information You provide. You further authorize Bestline Business Funding and each of the Recipients that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transactions (collectively, "Transactions") to obtain consumer or personal, business and investigative reports and other information about You, including, but not limited to 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, financial institutions, creditors and other third parties. You authorize Recipients to receive relevant information regarding the commercial lease for the above- referenced premises from our leasing company and/or agent. You also authorize Bestline Business Funding to transmit this Application, along with any of the foregoing information obtained in connection with this Application, to any or all of the Recipients for the foregoing purposes. A photocopy of the Application will be deemed acceptable for release of credit and/or investigatory information.

Signature #1

Date

Signature #2

Date