

General Background: Merchant Information

Type of Entity (check one) 🗖 corporation 📮 limited liability company 📮 partnership 📮 limited partnership 📮 limited liability partnership 🗖 sole proprietorship											
Merchants Legal Name					D/B/A					Federal ID (or SS# for Sole Proprietorship)	
Physical Address					City, State, Zip					hone	
Mailing Address / Billing Address					City, State, Zip				Business F	ax	
State of Incorporation/Organization Business Ty			roduct/Service Sold	Date business started (mm/yy)			Length of Ownership		Use of Proceeds		
Contact Name Position				Email Address			Web Address		Amount Requested		
Merchant Ownership Information: Owner No. 1 Percentage (%) of Ownership											
Name			Social Security Nun	nber		Dat	Date of Birth		Position		
Driver's License # & State			Home Phone #		-			Cell Phone #			
Residence Address					Cit	City, State, Zip					
Length at Current Residence Email Address											
Merchant Ownership Information: Owner No. 2 Percentage (%) of Ownership											
Name Social Securi			umber	Date of Birth					Position		
Driver's License # & State			Home Phon					Cell Phone	#		
Residence Address			City, State, Zip								
Length at Current Residence Email Address											
Sales & Credit Card Processing Information											
Annual Gross Sales Avg. Gross Monthly Volume (Cash, Checks, Credit Cards)											
Seasonal Sales: Yes No If yes, high volume months: Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec											
Funding Information											
Do You Have an OPEN Cash Advance Or Small Business Loan? YES NO If Yes, Company and Current Balance:											
Used A Cash Advance Program or Small Business Loan before? EH YES EH NO If Yes, Company:											
Any State / Federal Tax Liens Against Owner? EH YES EH NO If Yes, Details:											
Have You Or Business Ever Declared Bankruptcy? EH YES EH NO If Yes, Details:											
Are Any Suits Or Judgments Pending? EH YES EH NO If Yes, Details:											
Business Property Information											
Own/Lease	Lease Start Date	Lease Term		Mthly Rent	/Mtg	1		Type of Building		Square Footage (approx)	
Landlord / Mortgage Company		Contact Name		Phone Number			Fax				
Other Information											
Did you enclose any additional information?			Sales Representative (Please Stephen F.		liams		Sales Agent #			^{Contract #} 325-227-8414	
1 RafterJ and its authorize Rafter J and its authorized a	agents will conduct indeper					dit's	authorized agents, a	nd			
2. Merchantacknowledges and agrees that a consumer or investigative report, including a credit check with recognized credit reporting agency s), may be conducted in connection with this Application. Merchant hereby authorizes Rafter J and it's authorized agents and representatives to (i) initiate such reports, investigations and /or credit checks, (ii) investigate any statements made or data received from or about Merchant and/or its owners/share holders, and(ii) contact any references given by Merchant or its owners/shareholders.											