



Business Information

| Business information | , , , , | | | | | | | | |
|--|----------------|-------------------------|------------------------|--|-------------------------------------|----------------------|---|---------------------------|--|
| Legal/Corporate Name: | | | | | DBA: | | | | |
| Physical Address: | | | | | City: | | State: | Zip Code: | |
| Phone Number: | | Fax: | | | Sta | te of Incorporation: | Federal Tax Id: | | |
| | | | Sole Proprietorship | | | ☐ Partnership | Date Business Started: (Month/Day/Year) | | |
| ☐ Corporation ☐ LLC | | | | | | ☐ Other | | | |
| Email Address: | | | | | We | ebsite Address: | | | |
| Merchant/Owner Int | ormation | | | | | | | | |
| Corporate Officer/Own | Title: | | | Length of Ownership: year and month | | | | | |
| Home Address: | City: | | | State: | | Zip Code: | Ownership %: | | |
| Date of Birth (Month/Day/Year): | | Social Security Number: | | | Но | me Phone Number: | Cell Phone Number: | | |
| | | | | (| | | | | |
| Partner Information | 1 | | | | | | | | |
| Corporate Officer/Owner Name: | | Title: | | | Length of Ownership: year and month | | | | |
| | | | | | | | | | |
| Home Address: | | City: | | | State: | | Zip Code: | Ownership %: | |
| Date of Birth (Month/Day/Year): | | Social Security Number: | | | Но | me Phone Number: | Cell Phone Number: | | |
| | | | | | (| | () | | |
| Business Property I | nformatio | n | | | | | | | |
| Own/Lease: Time at this loo | | | location: Monthly Rent | | t or Mortgage: | | Date Lease Ends (Month/Day/Year) | | |
| Business Landlord or Mortgage Bank: | | | | | | d/or Account No: | Office/Mobile Number: | | |
| | | | | | , | | , | | |
| | | | | | | | | | |
| Other Information | | | | | | , | | | |
| Average Monthly Gross Revenue: \$ | | | | | Requested Advance Amount: \$ | | | | |
| Do you usually close the business during | | | | Any open State/Federal Tax Liens Against | | | Any Lawsuits of Judgments Pending | | |
| part of the year? | | | Business or Owner? | | | | against Business or Owner? | | |
| ☐ Yes ☐ No Details: | | | | Yes 🗆 No 🗅 | | | ☐ Yes ☐ No Details: | | |
| Do you currently have a cash advance | | | | | | lvance, what is the | And what dots was it received? | | |
| balance open with another company? | | | balanced owed? | | | | and what date was it received? | | |
| ☐ Yes ☐ No Details: | | | | urrent Balance: | : | Funded by: Date: | | | |
| By signing the Applicant and investigate any other data or | | | | | | | | u or credit agency and to | |
| Applicant Signature: | | | | | Co-Applicant Signature: | | | | |
| | | , | | , | | | | | |

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 MapCap Funding ("MapCap 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 MapCap 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 MapCap 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.