

## Merchant Pre-Qualification Form

(704) 380-7474

info@workingcapitalsolutions.app

COMPANY INFORMATION		Date of Application
Legal Name & DBA:		Has Any Owner Been Convicted of a Felony?
Legal Entity Type:		Any Existing Cash Advances?
State of Inception:		Balance of Current Advances
Business Inception Date (Under Current Owner):		Funding Company?
Federal Tax ID:		Business Bank Name:
Physical Address:		Business Home Based?
City:	State:	Rent or Own:
Zip Code:	Landlord Phone:	
Business Phone:	Business Cell Phone:	Landlord Name:
Business Email:		Industry Type:

BUSINESS FINANCIAL INFORMATION	
Gross Annual Sales from Last Years Tax Returns: \$	Average Monthly Bank Deposit: #
Average Daily Business Bank Balance: \$	Average Monthly Sales: \$
Current Credit Card Processor:	Average Monthly Credit Card Sales: \$
Credit Card Sales Last Month: \$	Credit Card Batches Last Month: #
Credit Card Sales Two Months Ago: \$	Credit Card Batches Two Months Ago: #
Credit Card Sales Three Months Ago: \$	Credit Card Batches Three Months Ago: #
Credit Card Sales Four Months Ago: \$	Credit Card Batches Four Months Ago: #

OWNER / OFFICER INFORMATION (1)		Date Application Signed
First Name:		Last Name:
Officer Title:	Drivers License #:	Date of Birth:
Business Ownership %:	Social Security Number:	
Home Address:		City:
State:	Zip Code:	Signature Owner (1):
Print Name (1):		

OWNER / OFFICER INFORMATION (2)		Date Application Signed
First Name:		Last Name:
Officer Title:		Social Security Number
Drivers License #:		Signature Owner (2):
Print Name (2)		

*By signing above, each of the above listed business and business owner/officer (individually and collectively, "you") authorize ( ) 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 ( ) 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 ( ) and to each of the Recipients, on its own behalf. I am providing my cellphone number and 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 msgs/month. I/We certify that all the information contained herein is complete, true and accurate.*