

BUSINESS INFORMATION

Business Name		DBA Name		Business Phone Number		Business Fax Number	
Web Address				Email		Alternate / Cell Phone Number	
Business Address		City		State		Zip	
State of Incorporation/Organization			Federal ID Number		Use of Proceeds		
Products Sold:	Style of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> P.C. <input type="checkbox"/> L.L.C.			Total Annual Sales		Avg. Mo. Sales (V/MC Sales)	
Type of Business: <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Restaurant <input type="checkbox"/> Lodging <input type="checkbox"/> MO/TO <input type="checkbox"/> Internet							
Do you currently have a cash advance with another company? (Circle one)		What is the name of the advance company			What is your total current balance		
Yes <input type="checkbox"/> No <input type="checkbox"/>							
Credit Card Processing Terminal(s)/Software Model				Number of Terminals		Advance Amount Requested	
Date Business Started (mm/yy)				Length of Ownership:			

REFERENCES

FUNDING INFORMATION

Landlord/Mortgage Reference		Time Remaining on Lease/Mortgage		Monthly Rent/Mortgage Payment	
Contact Name	Phone No. ()	Lease Start Date Footage(approx)	Type of Building	Square	
Business Trade Reference		Any State/Federal Tax Liens Against Owner?		If Yes, Details:	
Contact Name	Phone No.	Have You Or Business Ever Declared Bankruptcy?		If Yes, Details:	
Business Trade Reference		Are Any Suits Or Judgments Pending?		If Yes, Details:	
Contact Name	Phone No.	Is the Merchant Current With Rent/Mortgage Payments for the Business?			
Business Trade Reference		What are the Daily/Weekly Hours of Operation of the Business?			
Contact Name	Phone No.	How Fast do You need the Money?			

MERCHANT/OWNER INFORMATION

PARTNER INFORMATION

Name		Date of Birth		Name		Date of Birth					
Title / Percentage (%) of Ownership		Social Security No.		Title / Percentage (%) of Ownership		Social Security No.					
Residence Address	Own/Rent	City	State	Zip	Residence Address	Own/Rent	City	State	Zip		
Length at Current Residence:		Drivers License#:		Drivers License State:		Length at Current Residence:		Drivers License#:		Drivers License State:	
Home Phone Number ()		Cell Phone Number ()		Home Phone Number ()		Cell Phone Number ()					

AUTHORIZATION

Applicant authorizes MSI Merchant Services, Its assignees, agents, banks, or financial institutions to obtain an investigative or consumer report from a credit bureau or a credit agency and to investigate the references given on any other statements or data obtained from applicant.

Authorized Signature X	Date	Authorized Signature X	Date
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