

**MERCHANT PRE-QUALIFICATION APPLICATION**

**Funding Application**

Business Legal Name ("Merchant"):	Business DBA Name:
Address:	City, State Zip:
Phone:	Fax:
Legal Entity: <input type="checkbox"/> Corp <input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Other	Email:
Industry Type:	Federal Tax ID #:
Is This a Home Based Business?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Business Start Date:

**Financial Information**

Amount Requested: \$	Credit Score:	Do You Have An Existing Cash Advance Or Loan? <input type="checkbox"/> Yes <input type="checkbox"/> No
What Is Your Intended Use Of The Funds?		Lender: _____ Balance: _____
Gross Annual Sales (From Last Years Tax Return): \$		Lender: _____ Balance: _____
Do You Have Any Tax Liens Or Judgments Against You? <input type="checkbox"/> Yes <input type="checkbox"/> No		Personal Or Business Bankruptcy In The Past 2 Years? <input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, Are You On a Payment Plan?: <input type="checkbox"/> Yes <input type="checkbox"/> No		Discharged?: <input type="checkbox"/> Yes <input type="checkbox"/> No Discharge Date: _____

**Owner # 1** **Owner # 2**

Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Home Phone:	Home Phone:
Mobile:	Mobile:
Email:	Email:
% of Ownership:	% of Ownership:
Date of Birth:	Date of Birth:
SSN:	SSN:

**Business Property Information**

Do You Own Or Lease? <input type="checkbox"/> Own <input type="checkbox"/> Lease Monthly Rent/Mtg:\$	If You Own:
Landlord/Mortgage Company:	Are You Current On Your Property Taxes? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone: Email:	Do You Have An Outstanding Mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, Are You Current On The Mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No

**AUTHORIZATIONS**

By signing below, each of the above listed business and business owner/officer (individually and collectively, "you") authorize AllFi Inc. ("AllFi") 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 limitation the application therefor (collectively, "Transactions") to obtain consumer 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 AllFi to transmit this application form, along 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 AllFi and to each of the Recipients, on its own behalf.

**Owner # 1**

**Owner # 2**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_