

Cash Advance and Loan Application



Tel: (226) 240-0590 1300 I street NW, Suite 400E Washington 20005 Email: cash@takepaymentsus.com www.takepaymentsus.com

Please fill in the form below and email your completed application to the email listed above. By signing below, you certify that all information and documents submitted in connection with this application are true, correct, and accurate. Incomplete applications will not be processed.

BUSINESS CONTACT INFORMATION		BUSINESS INFORMATION	
Business Legal Name:		Legal Entity: <input type="checkbox"/> Corp <input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership	
DBA:		State of Organization:	
Address:	Suite/FI:	Business Start Date (MM/YYYY):	
City:		Industry Description/SIC:	
State:	Zip:	Type of Product/Service Sold:	
Business Phone:		Was Business Purchased from a Previous Owner? Yes No	
Website:		Date Current Ownership Started:	
Tax ID Number:			
FINANCIAL INFORMATION		PROPERTY DETAILS	
Annual Business Revenue:		Do you own the business property? <input type="checkbox"/> Rent <input type="checkbox"/> Mortgage <input type="checkbox"/> Own	
Avg. Monthly Credit Card Volume:		Monthly Rent/Mortgage:	
Number of Business Bank Accounts:		Are you current with rent/mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Average Daily Bank Balance:		Landlord Name:	
Do you have any outstanding loans or advances? <input type="checkbox"/> Yes <input type="checkbox"/> No		Landlord Phone:	
Outstanding Loan/Advance Balance:		Remaining length of lease:	
Amount Requested:			
Purpose of funds requested:			
OWNER / PRINCIPAL INFORMATION (Owner 1)		OWNER / PRINCIPAL INFORMATION (Owner 2)	
Name:		Name:	
Date of Birth:		Date of Birth:	
Home Address:		Home Address:	
City:	State:	City:	State:
Zip:	SSN:	Zip:	SSN:
Email:		Email:	
Mobile:	Percent Ownership:	Mobile:	Percent Ownership:
<input type="checkbox"/> US Citizen <input type="checkbox"/> US Permanent Resident <input type="checkbox"/> Other		<input type="checkbox"/> US Citizen <input type="checkbox"/> US Permanent Resident <input type="checkbox"/> Other	

(If additional Owners/Principals, please attach that information to this application.)

Authorizations: By signing below, each of the above listed business and business owners (individually and collectively, “you”) authorize Take Payments US, LLC (“TPU”) and its affiliates, successors, assigns and designees (“Recipients”) to obtain consumer, personal and business 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 TPU to transmit this Application, along with any information obtained in connection with this Application, excluding consumer credit reports, to any or all of the Recipients. Further, you give TPU, or an agent acting on its behalf, permission to call and/or send you text/SMS messages at the phone number(s) provided above, including your wireless number, using an automated telephone dialling system or other similar system for marketing purposes.

 **Owner 1 Signature:** _____  Date: _____

 **Owner 2 Signature:** _____  Date: _____