



Med Loan Finance

Business Credit Application

Company/Legal Business Name:				Doing Business As/DBA:			
Business/Physical Address (No PO Boxes):				City:		State:	Zip:
Business Phone Number:		Business Fax Number:		Federal Tax ID:		Business Started: (mm/dd/yyyy):	# of Employees:
Requested Loan Amount: \$	Seasonal Business? Yes No	Purpose of Loan:					
Business Profitable in Previous Year? Yes No		Average Current Monthly Revenue: \$		Annual Revenue (Previous Year) \$		Approximate Current Year End Revenue? \$	Year End
Type of Entity: Sole Proprietorship Partnership Corporation LLC				Product/Services Sold:			
Email Address:				Website Address:			

Principal Owner #1

Last Name:			First Name:			Title:		Ownership %:
Home Address:					City:		State:	Zip:
Social Security Number:		Date of Birth:		Home Phone Number:		Mobile Phone Number:		Annual Gross Income \$
Home Ownership (Y/N): Yes No		Cash Bank Account Balance: \$		Real Estate Assets: \$		Investment Assets: \$		Retirement Assets: \$

Principal Owner #2

Last Name:			First Name:			Title:		Ownership %:
Home Address:					City:		State:	Zip:
Social Security Number:		Date of Birth:		Home Phone Number:		Mobile Phone Number:		Annual Gross Income \$
Home Ownership (Y/N): Yes No		Cash Bank Account Balance: \$		Real Estate Assets: \$		Investment Assets: \$		Retirement Assets: \$

Business Property / Landlord Reference

Do you Rent or Own? Rent Own	Rent Expiration Date:	Monthly Rent \$	Landlord Contact Name:		Contact Phone Number:	
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Avg. # Monthly Bank Deposits:	Avg. Daily Check Balance: \$	Avg. Monthly Check Balance: \$	Monthly Credit Card Sales: \$	Credit Card Processor:
Has business filed bankruptcy in the past 24 months?		Business free of tax liens or judgments? Any Merchant Cash Advance in past 90 days?		

Current Cash Advance Balance(s)

Company	Balance	Daily Payment
1	\$	\$
2	\$	\$

By Signing the Agreement, the Merchant and Principal Owners (Client) hereby authorize inquiry into their credit and financial information, including, but not limited to consumer reports and credit bureaus, and criminal and civil matters. Without limiting the generality of the preceding sentence, the Merchant hereby authorizes Med Loan Finance.com (MLF) and/or it's partners or affiliates, to obtain consumer and/or investigative reports from one or more consumer reporting agencies about Merchant and Principal Owner(s). Client certifies that all information provided is accurate to client's knowledge. Prequalified offers are not binding and don't constitute a commitment to fund.

Owner #1 Signature & Date

Owner #2 Signature & Date