



<b>Business Legal Name:</b>				<b>Business DBA Name:</b>			
<b>Type of Business Entity (Check One)</b>	Corporation	Limited Liability Company	Partnership	Limited Partnership	Limited Liability Partnership	Sole Proprietor	Other
<b>Does the Merchant have any other businesses with open contracts for working capital:</b>		Yes No	<b>State Of Incorporation:</b>		<b>Use Of Proceeds:</b>		
<b>Physical Street Address:</b>			<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>		
<b>Billing Street Address (If different than above):</b>			<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>		
<b>Physical Location Phone #:</b>		<b>Billing Location Phone #:</b>		<b>Preferred Contact Phone #:</b>		<b>Fax #:</b>	
<b>Landlord Full Name:</b>				<b>Landlord Phone #:</b>			
<b>Federal Tax Id:</b>		<b>Website Address:</b>			<b>Any Judgments/Liens:</b> Yes No		
<b>Is Business Seasonal?</b> Yes No		<b>If yes, what are the Peak Months</b>			<b>Any Open Bankruptcies?</b> Yes No		
<b>Industry Type: (SIC Code or Description):</b>			<b>Rented Amount:</b>		<b>Mortgaged</b>		<b>Current Credit Card Processor:</b>
<b>Gross Annual Sales (Previous year's Tax return):</b>			<b>Date the Business first processed Credit Cards under current Ownership/Business Start Date:</b>			<b>Average Monthly Credit Card Volume:</b>	
<b>List the total VISA/MasterCard processing volumes from previous four months:</b>	<b>Last Month:</b>		<b>Two Months Ago:</b>		<b>Three Months Ago:</b>		<b>Four Months Ago:</b>
	\$	\$	\$	\$	\$	\$	
	#Tickets	#Tickets	#Tickets	#Tickets	#Tickets	#Tickets	

<b>Owner/Officer</b>		<b>Primary Contact</b>		<b>Job Title:</b>		<b>Cell Phone:</b>	
<b>Last Name:</b>		<b>First Name:</b>		<b>SS#:</b>		<b>Date Of Birth:</b>	
<b>Street Address:</b>		<b>City:</b>		<b>State:</b>		<b>Home Phone:</b>	
<b>Second Owner(If Any)</b>		<b>First Name:</b>		<b>Last Name:</b>		<b>Percentages:</b>	

<b>Business Trade Reference #1:</b>	<b>Phone #:</b>
<b>Business Trade Reference #2:</b>	<b>Phone #:</b>
<b>Business Trade Reference #3:</b>	<b>Phone #:</b>

**Authorizations**

The merchant and Owner(s)/Officer(s) identified above (individually, an "Applicant") each represents, acknowledges and agree that (1) all information and documents provided to Empire Merchant Group, LLC("EMG") including credit card processor statements are true, accurate and complete, (2) Applicant will immediately notifyEMG of any change in such information or financial condition, (3) Applicant authorizes EMG to disclose all information and documents that EMG may obtain including credit reports to other persons or entities (collectively, "Assignees") that may be involved with or acquire commercial loans having daily repayment features or purchase of future receivables including Merchant Cash Advance transactions, including without limitation the application therefore (collectively, "Transactions") and each Assignee is authorized to use such information and documents, and share such information and documents with other Assignees, in connection with potential Transactions, (4) each Assignee will rely upon the accuracy and completeness of such information and documents, (5) EMG, Assignees, and each of their representatives, successors, assigns and designees (collectively, "Recipients") are authorized to request and receive any investigative reports, credit reports, statements for creditors or financial institutions, verification of information, or any other information that a Recipient deems necessary, (6) Applicant waives and releases any claims against Recipients and any information-providers arising from any act or omission relating to the requesting, receiving or release of information and (7) each Owner/Officer represents that he or she is authorized to sign this form on behalf of Merchant.

**Owner / Officer's Name: (Print)** \_\_\_\_\_

**Owner / Officer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_