



CAPITAL SENSE FUNDING

Funding Application

BUSINESS INFORMATION

Doing Business As		Legal/Corporate Name		
Physical Address		City	State	Zip Code
Mailing Address (if different from physical address)		City	State	Zip Code
Phone	Fax	Cell	Email Address	
Business Start Date	State of Incorporation	Federal Tax ID	Website Address	
Type of entry (select one) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> Other			Products/Services Sold	
Current cash advance companies and balances with each		Use of Funds	Amount Requested	

OWNERSHIP INFORMATION

Applicant #1 Name		Title	Ownership Since		
Home Address	City	State	Zip Code	Ownership %	
Date of Birth	Social Security Number	Home Phone	Cell Phone		
Applicant #2 Name		Title	Ownership Since		
Home Address	City	State	Zip Code	Ownership %	
Date of Birth	Social Security Number	Home Phone	Cell Phone		

BUSINESS PROPERTY INFORMATION

Rent or Own <input type="checkbox"/> Rent <input type="checkbox"/> Own	Ownership Since	Monthly Rent/Mortgage	Lease Start Date	Lease Expiration
Landlord/Mortgage Co.	Contact Name/Account No.	Phone	Email Address	

BUSINESS TRADE REFERENCES

Business Name	Contact	Phone	Fax	Email

Any State/ Federal Tax Liens Against Business or Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No Details_____	Have you ever filed for bankruptcy ? <input type="checkbox"/> Yes <input type="checkbox"/> No Details_____	Is the business seasonal? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Applicant authorizes agent its assignees, agents, banks or financial institutions to obtain an investigative report from credit bureaus or credit agencies, and also to investigate the References, Landlord and any other references provided an application or any other documents submitted by Applicant and applicant's named officer or Owner for the purposes of obtaining funding

1st Applicant's Signature	Date	2nd Applicant's Signature	Date
X		X	