

Business Funding Application - Business Information

BUSINESS INFORMATION

BUSINESS LEGAL NAME

DBA / TRADE NAME

FEDERAL TAX ID (EIN)

BUSINESS START DATE

BUSINESS ADDRESS

CITY / STATE / ZIP

BUSINESS PHONE

CELL PHONE

EMAIL ADDRESS

WEBSITE

BUSINESS TYPE

☐ Corporation ☐ LLC ☐ Sole Prop. ☐ Other

FRANCHISE

☐ Yes ☐ No

PRODUCTS / SERVICES SOLD

SEASONAL BUSINESS?

AVERAGE MONTHLY CREDIT CARD SALES

GROSS ANNUAL REVENUE

LANDLORD CONTACT

PROPERTY STATUS / LEASE TERM

LANDLORD PHONE

DESIRED WORKING CAPITAL

EXISTING CASH ADVANCE / LOAN?

☐ Yes ☐ No

REASON / USE OF WORKING CAPITAL

CURRENT WORKING CAPITAL PROVIDER

DATE OF ADVANCE / LOAN

WORKING CAPITAL RECEIVED

PAYBACK AMOUNT

CURRENT BALANCE

DAILY HOLDBACK %

Complete Owner / Officer information on Page 2.

Owner / Officer Information & Business References

OWNER / OFFICER INFORMATION

Owner / Officer 1

FULL NAME

TITLE

HOME ADDRESS

CITY / STATE / ZIP

PHONE

OWNERSHIP %

DATE OF BIRTH

SSN

DRIVER'S LICENSE #

CREDIT SCORE

Owner / Officer 2

FULL NAME

TITLE

HOME ADDRESS

CITY / STATE / ZIP

PHONE

OWNERSHIP %

DATE OF BIRTH

SSN

DRIVER'S LICENSE #

CREDIT SCORE

BUSINESS REFERENCES

TRADE REFERENCE 1

PHONE 1

TRADE REFERENCE 2

PHONE 2

TRADE REFERENCE 3

PHONE 3

Authorization, Disclosures & Signatures

The merchant and owner(s)/officer(s) identified in this application (each, an "Applicant") represent, acknowledge and agree to the following:

1. All information and documents provided to White Eagle Partners LLC (W.E.P.) and/or Simple Company Loans (S.C.L.), including credit card processor statements, are true, accurate and complete.
2. Applicant will promptly notify White Eagle Partners LLC and/or Simple Company Loans of any material change in the information provided or in the Applicant's financial condition.
3. Applicant authorizes S.C.L. to disclose information and documents it obtains, including credit reports, to persons or entities that may be involved with, evaluate, fund, purchase, assign or acquire commercial financing transactions, including commercial loans with daily repayment features or purchases of future receivables (collectively, "Assignees").
4. Applicant understands that S.C.L., Assignees, and their representatives, successors, assigns and designees (collectively, "Recipients") may rely on the accuracy and completeness of the information and documents provided in connection with any financing transaction.
5. Applicant authorizes Recipients to request and receive investigative reports, consumer and/or business credit reports, statements from creditors or financial institutions, verification of information, and other information a Recipient reasonably deems necessary to evaluate a transaction.
6. Each owner/officer signing below represents that he or she is authorized to sign this application and related authorizations on behalf of the Applicant and consents to the release and verification of information described above.

☐ I have read and agree to the authorization and disclosure terms above.

Officer / Owner 1

PRINTED NAME

TITLE

DATE

SIGNATURE (TYPE FULL LEGAL NAME)

PHONE

Officer / Owner 2

PRINTED NAME

TITLE

DATE

SIGNATURE (TYPE FULL LEGAL NAME)

PHONE

Electronic completion of this form does not guarantee approval or funding. Additional documentation may be required. This application is intended for business-purpose financing only.