



FIRST DOWN FUNDING
Main: (202) 360-4959
Fax: (888) 503-0807
Email: info@firstdownfunding.com

FIRST DOWN FUNDING APPLICATION

DATE:

BUSINESS IDENTIFICATION INFORMATION

Business name (DBA):
Business legal name:
Description of business:
Physical business address:
Business phone number: State of incorporation:
Primary business structure: Franchise Other
Corporate business structure: Corporation Partnership Sole Proprietor
LLC LLP Other

Business start date under current ownership:

BUSINESS PROFILE

Approximate annual sales: Number of full time employees:
Gross annual sales (from previous year tax returns):
Do you rent or own your own office space? Own Rent
Monthly rent or mortgage amount?
EIN/Tax ID number:

OWNER/OFFICE #1

Full name: Date of birth:
Residence address:
Cell phone:
Email address:
Social security number:
Annual income:
Ownership percentage:

If you own 50% or more of the business and do not wish to apply for joint credit with any other owner(s), please skip Section IV. Please note that 50% or more of combined ownership percentage is required in order to be eligible for submission.

OWNER/OFFICE #2

Full name: Date of birth:
Residence address:
Cell phone:
Email address:
Social security number:
Ownership percentage:

INTENDED USE OF PROCEEDS

Please explain how you plan to allocate the funds and how the investments will impact your business:

OTHER CREDIT RELATIONSHIPS

Does the merchant have any open MCA accounts? Yes No

If yes, funding company name:

Estimated term:

Remittance remaining:

Do you have an outstanding business loan? Yes No

If yes, lender name:

Repayment term:

Total outstanding balance:

Maturity date:

AUTHORIZATIONS

By signing below, each of the above listed business owner/officer (individually and collectively, "You") authorize First Down Funding and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having repayment features or purchases of future receivables including Merchant Cash Advance transactions, including without limitation the application therefore (collectively, "Transactions") to obtain consumer or personal, business and investigate 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 form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for foregoing purposes. You can also consent to the release, by any creditor or financial institution, of any information relating to any of you, to First Down Funding and to each of the Recipients, on its own behalf.

Owner/Office #1 Signature:

Owner/Office #1 Name (please print):

Date:

Owner/Office #2 Signature:

Owner/Office #2 Name (please print):

Date: