

## PLEASE FILL OUT COMPLETELY

Legal Business Name Caemdben Enterprise		Business Phone Number		Business Fax Number	
DBA Business Name		Date/Year Started 2019-12-25		Monthly Rent 2500	
Web Address 249 Wishing Well Cir SW			Email Address		
Owned Business For?			Alternate / Cell Phone Number		
Business Address: Street 249 Wishing Well Cir SW		City Palm Bay		State FL	
Seasonal Business? No		Tax ID Number 851604439		Zip 32908	
Style of Business		Monthly Total Sales \$5000		AVG Daily Bank Balance	
Use Of Funds			Advance Amount Requested		

## REFERENCES

Landlord Contact Name and Number		Length of Time at Location		Time Remaining on Lease	
Trade Reference #1 Contact Name and Number			Trade Reference #2 Contact Name and Number		

## QUALIFYING QUESTIONS


Do you own any commercial or residential property?	No	Do you currently have a cash advance?	No
Do you own any vehicles, equipment or machinery?	No	If yes, which advance company and what is your current balance?	
Does your business have future receivables (unpaid invoices)?	No	<b>Company</b>	<b>Balance</b>
Are you looking to purchase equipment?	No	1. _____	_____
Any open Liens or Judgments?	No	2. _____	_____
Did you ever file for bankruptcy?	No	3. _____	_____
If yes, what is the status	Discharged	4. _____	_____
Bankruptcy Year			

## PERSONAL INFORMATION ON PARTNERS, PROPRIETORS, OR GUARANTOR


Name Carolyn		Credit Score (If Known)		Name Thomas		Credit Score (If Known)	
Title/% Ownership 100	Social Security No 130789239	DOB 1978-10-25		Title/% Ownership	Social Security No	DOB	
Address 249 Wishing Well Cir SW				Address			
City Palm Bay	State FL	ZIP 32908		City Palm Bay	State FL	ZIP 32908	
Home Phone Number		Rent/Own (How Long)		Home Phone Number		Rent/Own (How Long)	

## AUTHORIZATION

Each of the undersigned, who is either a Principal, Sole Proprietor or Personal Guarantor of the above-named business, recognizes that his or her individual credit history may be a factor in the evaluation of this application for funding of the above-named business. Each of the undersigned hereby authorizes Deliver Funding Inc. and its assigns and/or affiliate partners of Deliver Funding Inc. to obtain his or her credit report (and any updates to his or her credit report) in connection with Deliver Funding Inc. consideration of this application and any affiliate partners of Deliver Funding Inc. in connection with any subsequent review of the account of the above-named business. Each of the undersigned hereby authorizes Deliver Funding Inc. to utilize information including but not limited to calls, emails, texts and direct mail for marketing efforts from Deliver Funding Inc. and affiliates.

  
Signature  
Partner, Proprietor or Guarantor

Date: 11/25/2025  
Time: 9:16:28 PM  
IP: 172.18.0.1

  
Signature  
Partner, Proprietor or Guarantor