

Business Information

Legal/Corporate Name:		DBA:		
Physical Address:		City:	State:	Zip:
Telephone #:		Fax #:		Federal Tax ID (EIN):
Date Business Started:		Length of Ownership:		Website:
Type of Entity (Circle one): Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other <input type="checkbox"/>				Email Address:
Type of Business (Circle all that apply): Retail <input type="checkbox"/> MO/TO <input type="checkbox"/> Wholesale <input type="checkbox"/> Restaurant <input type="checkbox"/> Supermarket <input type="checkbox"/> Other <input type="checkbox"/>			Product/Service Sold:	

Merchant/Owner Information

Corporate Officer/Owner Name:		Title:	Ownership % :	FICO Score:
Home Address:		City:	State:	Zip:
SSN:	Date of Birth:	Home #:		Cell #:

Partner Information

Corporate Officer/Owner Name:		Title:	Ownership % :	FICO Score:
Home Address:		City:	State:	Zip:
SSN:	Date of Birth:	Home #:		Cell #:

By signing below, each of the above listed business and business owner/officer (Individually and collectively, you) authorize Sea Cap Brokerage LLC, under the Fair Credit Reporting Act, and each of its representatives, successors, assigns and designees (Recipients) that may be involved with or acquire commercial loans having daily 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 investigative 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, Equifax, LexisNexis, and from other credit bureaus, banks, creditors and other third parties. You also authorize Sea Cap Brokerage LLC to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes, and you consent to the release, by any creditor or financial institution, of any information relating to any of you, to Sea Cap Brokerage LLC and to each of the Recipients, on its own behalf. Furthermore, you authorize us to send any legally required notices via electronic mail to the email address identified on the application and authorize any lender receiving the application to contact you via telephone or text message for the purpose of marketing calls and text messages at the phone number(s) listed on the application, even if the number(s) provided are on any state, federal, or corporate do-not-call registry.

Applicant's Signature

Partner's Signature

Date

Onboarding Rep: