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**DON'T WAIT, COMPLETE NOW!**  
**Merchant Pre-Qualification Form**

<b>Business Legal Name:</b>			<b>Business DBA Name:</b>		
<b>Type of Business Entity</b> (Check One):		<b>Primary Business Structure:</b> (Check All That Apply):		<b>Does the Merchant have any open MCA or loan accounts?</b> (Check one): Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Federal Tax ID:</b>
<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Ltd. Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Sole Proprietor		<input type="checkbox"/> Home-Based Business <input type="checkbox"/> office Building <input type="checkbox"/> Commercial warehouse <input type="checkbox"/> None of the Above			
<b>Industry Type:</b> (Describe)	<b>Business start date under current Ownership:</b>	<b>State of Incorporation:</b>	<b>Use of Proceeds:</b>	<b>email address:</b>	<b>Website address:</b>
<b>Physical Street Address:</b>			<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Billing Street Address (If different than above):</b>			<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Gross Annual Sales</b> (from previous year Tax return): <small>*only if in business one year or more</small>		<input type="checkbox"/> Rented <input type="checkbox"/> Mortgaged Monthly Payment:	<b>If Rented:</b> Landlord Name: Contact #:	<b>If Mortgaged:</b> Lenders Name:	
<b>Do you own your Home?</b> if yes, please provide the lender Name	<b>Last Month: -Total Bus. Bank Deposits:</b> \$ _____	<b>Two Months Ago: Total Bus. Bank Deposits:</b> \$ _____	<b>Three Months Ago: Total Bus. Bank Deposits:</b> \$ _____	<b>Four Months Ago: Total Bus. Bank Deposits:</b> \$ _____	
<b>\$ Credit card volumes:</b>	<b>Last Month:</b> \$ _____	<b>Two Months Ago:</b> \$ _____	<b>Three Months Ago:</b> \$ _____	<b>Four Months Ago:</b> \$ _____	
<b>Owner/Officer Contact Information:</b>			<b>Job Title:</b>		
<b>First Name:</b>	<b>Last Name:</b>	<b>SS#:</b>	<b>Date of Birth:</b>	<b>Home Phone:</b>	
<b>Street Address:</b>			<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

Is Your Business Seasonal?  Yes  No    If yes, what are the peak months: \_\_\_\_\_ Any Judgements/Liens  Yes  No

Second owner name: \_\_\_\_\_ SS#: \_\_\_\_\_ and % \_\_\_\_\_ of ownership, if applicable

Third owner name \_\_\_\_\_ SS#: \_\_\_\_\_ and % \_\_\_\_\_ of ownership, if applicable

**AUTHORIZATIONS**

By signing below, each of the above listed business and business owner/officer (individually and collectively, "you") authorize [We Lend You LLC.] 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 therefor (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 and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize We Lend You 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. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to We Lend You LLC, and to each of the Recipients, on its own behalf."

**Owner #1/Officer's Name:**(Print) \_\_\_\_\_ **Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner #2/Officer's Name:**(Print) \_\_\_\_\_ **Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner #3/Officer's Name:**(Print) \_\_\_\_\_ **Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_