



Please Fax or Email this application to:
 Fax: 305-520-5367 Email: preapp@thefundingtreeus.com

MERCHANT PRE-QUALIFICATION APPLICATION

A. BUSINESS INFORMATION

Legal/Corporate Name:			DBA:			
Physical Address:		City:	State:	Zip:		
Business Telephone:		Fax#:	Federal Tax ID:			
Contact Person:		Email Address:		Website:		
Date Business Started:	Length of Ownership:	Years at Location:		# of Locations:		
Type of Business Entity (check one)	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Sole Proprietor

B. OWNERSHIP

Name:		Home Phone:		Cell Phone:	
Home Address:		City:	State:	Zip:	
Date of Birth:	SS#:	Driver's License #		% Ownership Company:	Title:
Name:		Home Phone:		Cell Phone:	
Home Address:		City:	State:	Zip:	
Date of Birth:	SS#:	Driver's License #		% Ownership Company:	Title:

C. LANDLORD

Landlord Name:	Contact:	Cell Phone:	Work Phone:	Fax#:
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D. TRADE REFERENCES

Business Name:	Contact :	Phone:
Business Name:	Contact :	Phone:

E. FINANCIAL DATA

Gross Annual Sales (Previous year's Tax return):	Date the Business first processed Credit Cards under current Ownership/Business Start Date:	Average Monthly Credit Card Volume:		
List the total Visa/MasterCard processing volumes form previous four months:	Last Month:	Two Month:	Three Month:	Four Month:
	\$ # Tickets:	\$ # Tickets:	\$ #Tickets:	\$ #Tickets:

F. CASH ADVANCE

Amount Requested? _____	Do you currently have an outstanding cash advance? <input type="checkbox"/> (Check if "yes")	Balance: \$ _____
Company Name _____		

G. SIGNATURE

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/or financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/we authorize The Funding Tree to receive pertinent information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/we authorize you to update my/or credit profile from time to time in the future, as you deem appropriate.

Applicant's Signature #1: _____	Date: _____	Applicant's Signature #2: _____	Date: _____
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