

# Application Checklist

**Customer:**

**Sales Representative:**

**Phone Number:**

**Fax Number:**

**When complete, send the Application and the requested information to ACFC (Fax: 734-929-3805 or Sales@AdvanceCredit.com)**

**The following is a checklist to complete your Working Capital Application.**

## **Part I: Documents Enclosed**

This section lists the following applications contained in this package. Please complete all the forms in full.

- Working Capital Information Sheet - **1 page**
- Information Disclosure Letter - **1 page** -(Landlord / Mortgage Statement, Deed, or Property Tax)

## **Part II: Additional Documents Required**

This section will deal with a list of materials we need you to provide us. Send us ALL the information listed below.

- A copy of a voided check
- A copy of driver's license for each signature. (Everyone that has signed an application.)
  - If possible, please enlarge the copy of the driver's license before faxing.
  - An enlarged copy will help the clarity and expedite the application process.
- Proof of Ownership - a document that shows the business owner name(s) and percentage(s) of the business owned. (Some examples of such documents are Articles of Incorporation, LLC Member Agreement, Tax Return Schedule, etc...)
- Most recent month's business bank statements - **all pages**
- Complete Merchant Processing Statements for the last 4 months
  - We need to see the summary section as well as daily transactions
- W** Are you currently in a cash advance program?     Yes     No
- If Yes, please include last month's statement from your current cash advance provider.
- W** Name of cash advance provider: \_\_\_\_\_

**Once the application is conditionally approved, you will receive:**

- **Working Capital Agreement**
- **Merchant Processing Agreement**

*In order for your application to be processed in full, all items must be sent back and completed with signatures.  
Should you have further questions, please contact your account executive.*





## Information Disclosure Letter

I/We grant our irrevocable permission to release our confidential information to Advance Credit Funding Corporation and/or its affiliated companies. I/We understand this information is being used for their credit/underwriting purpose only.

This permission is specifically given to:

<b>BANK INFORMATION</b>			<b>LANDLORD INFORMATION</b>		
Bank Name:			Company Name:		
Address or Branch:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Contact Name:			Contact Name:		
Phone Number:			Phone Number:		

Permission is also granted to contact any business past, present or future, we may deal with including Banks, Landlords, and Insurance companies we currently use or will use in the future.

X  
\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Business Name)

X  
\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Business Name)

Verification of this authorization may be confirmed by calling the business at: \_\_\_\_\_  
(Business Telephone Number)