

Application
 Fax to 855.710.6363 or
 Email to info@targetedms.com
 866.863.2660



Loan MCA Either

Business Information

Legal Business Name (Business Applicant)	DBA Name
Street Address	Business Phone
City	Business Fax
State Zip	Email Address
Time Remaining on Lease/Mort.	Owned Business Since (Mth/Yr)
No. of Locations Type of Business	Business Open Date (Mth/Yr)

Financial Information

Avg. Monthly Volume – Credit Cards	Federal Tax ID Number (9 Digits)
Estimated Total Monthly Sales	Intended Use of Cash Advance
Requested Advance Amount	Is your business for sale?
Have you ever filed for bankruptcy?	Do you have federal or state tax liens?

Principal Owner Information #1

Principal Owner Information #2

Principal Owner Name	Social Security Number	Principal Owner Name	Social Security Number
Home Address	Date of Birth (00/00/0000)	Home Street Address	Date of Birth (00/00/0000)
City	% Ownership?	City	% Ownership?
State Zip	Home Phone	State Zip	Home Phone

The Business Applicant and each Principal, person or entity signing this Application or an Application Addendum Form ("Signer") certifies that all information provided by the Business Applicant and the Principal is true and complete and authorizes Small Business Financial Solutions, LLC, Rapid Financial Services, LLC and their affiliates (collectively "RapidAdvance") to: 1) obtain credit and employment information about the Business Applicant and Principal; 2) obtain credit reports and make any inquiries RapidAdvance considers appropriate in connection with this Application or reviews of the Applicant's account from time to time; 3) make RapidAdvance's experience with the Applicant's account and information about this Application available to credit bureaus or the Principal owners, and 4) disclose account information as required by law. Each signer acknowledges that additional information may be required in order to render a decision on this application.

EACH SIGNER ACKNOWLEDGES THAT RAPIDADVANCE MAY RELY ON THE STATEMENTS AND INFORMATION SET FORTH IN THIS APPLICATION AND THAT SUCH STATEMENTS AND INFORMATION MAY BE INCORPORATED BY REFERENCE IN ANY AGREEMENT ANY OF THE UNDERSIGNED MAY ENTER INTO WITH RAPIDADVANCE. EACH OF THE UNDERSIGNED HEREBY AGREES TO NOTIFY RAPIDADVANCE PROMPTLY OF ANY CHANGE IN ANY SUCH STATEMENT OR INFORMATION. EACH SIGNER HAS READ AND UNDERSTANDS THE TERMS OF THIS APPLICATION, INCLUDING ANY ADDENDUM, AND REPRESENTS AND WARRANTS THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

If applying for a loan, please note that the federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this Small Business Financial Solutions, LLC is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

By: _____ Title: _____ Print Name: _____ Date: _____
 (signature)
 Owner #1: _____ Print Name: _____ Date: _____
 (signature)
 Owner #2: _____ Print Name: _____ Date: _____
 (signature)

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 FOR PARTNER USE ONLY - FOR PARTNER USE ONLY - FOR PARTNER USE ONLY - FOR PARTNER USE ONLY

Merchant ID	Partner Name/ID	Partner Sales Person Name	Contact Number
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