



FUNDING APPLICATION

Business Information

Legal Name		Physical Location Phone #	Preferred Contact Phone #	
DBA		Cell Phone #	Fax #	
Federal Tax ID #	State of Incorporation	Email Address		
Business Start Date	Industry	Website Address		
Address		City	State	Zip Code

Gross Annual Revenue	Average Monthly Credit Card Sales	Funding Amount Requested
Monthly Bank Deposit Volume	Average Daily Bank Balance	Use of Funds

Property Type	Lease / Mortgage	Seasonal Business	Approximate Credit Score		Type of Business Entity
<input type="checkbox"/> Rent	<input type="checkbox"/> Current	<input type="checkbox"/> YES	<input type="checkbox"/> 400-500 FICO	<input type="checkbox"/> 600-700 FICO	<input type="checkbox"/> Corporation
<input type="checkbox"/> Mortgage	<input type="checkbox"/> Not Current	<input type="checkbox"/> NO	<input type="checkbox"/> 500-600 FICO	<input type="checkbox"/> 700+	<input type="checkbox"/> LLC
					<input type="checkbox"/> Partnership
					<input type="checkbox"/> Sole Proprietor

Lease / Mortgage Payment \$	Landlord Name / Mortgage Company	Contact Person	Landlord Phone #		
Do you have outstanding loans?	Lender	Current Balance \$	Original Amount \$	Payback Amount \$	Terms
	<input type="checkbox"/> YES				
	<input type="checkbox"/> NO				

Owner/Officer 1				Owner/Officer 2			
First Name		Last Name		First Name		Last Name	
Ownership %		Date of Birth		Ownership %		Date of Birth	
SSN#		Email Address		SSN#		Email Address	
Street Address				Street Address			
City	State	Zip Code		City	State	Zip Code	
Home Phone		Cell Phone		Home Phone		Cell Phone	

By signing below, each of the above listed business and business owners/officers/members (individually and collectively, the "Applicant") certifies that Applicant is authorized to submit this application on behalf of the above-named business. Applicant certifies that all information and documents submitted in connection with this Application are true, correct and complete and may be relied upon by Exit Plan Pro LLC ("EEP"). Applicant authorizes EEP to share this application and all supporting documentation with each of its representatives, successors, assignees, affiliates and designees including third party lenders (collectively "Assignees") that may be involved with the acquiring of commercial loans and/or other products. Applicant further authorizes EEP and all Assignees to request, receive, and review any investigative or credit reports to verify any information provided on the Application. Applicant consents to the release, by any credit or financial institution, of any information relating to Applicant, to EEP and to each of the Assignees, on its own behalf. Applicant also consents to email and/or text/SMS/fax messages. Furthermore, Applicant hereby waives and releases any claims against EEP, all Assignees, and any information-providers arising from any act or omission relating to the requesting, receiving or release of the

Owner/Officer 1 Print Name _____ Owner/Officer 1 Signature _____ Date _____

Owner/Officer 2 Print Name _____ Owner/Officer 2 Signature _____ Date _____