



“HOME OF THE SMALL BUSINESS **GROWTH LOAN**”

## Loan Application Package

- Please fill out all sections on application attached
- Please provide applicable supporting documentation including:
  - Last 4 – 12 months of Business Bank Statements of all bank accounts associated with your business (12 months if you are seasonal)
  - Last 4 – 12 months of Credit Card Processing Statements, if you accept credit cards, of all merchant accounts associated with your business (12 months if you are seasonal)
  - If there’s a present tax lien, judgment lien, or a previous bankruptcy, please provide documentation in relation to payment plan(s) or bankruptcy dismissal/discharge

Fax all documentation to 888-522-3373 and an update will be provided within 24 hours. Any questions please contact Merchant Support at **(248) 519-2461** or [Support@1stCapitalLoans.com](mailto:Support@1stCapitalLoans.com).

**GENERAL BUSINESS INFORMATION**

Business Legal Name		Contact Name	Contact Cell Phone
Business DBA Name		Contact Email Address	
Business Street Address		Type of Company Structure (Circle One) - LLC, Sole Prop, C-Corp, S-Corp, Partnership, or Other	
Business City, State, and Zip		Website Address	
Business Phone Number	Business Fax Number	Are You A Franchise? If Yes, Please List Franchisor Contact	
Business Start Date	Years Owned Business	Does the business have multiple locations?	
Product/Services Sold		Total Annual Sales	Average Ticket
Type of Industry		Federal Tax ID Number	State of Formation

**BUSINESS LEASE OR MORTGAGE INFORMATION**

Landlord or Mortgage Holder Name and Phone		Lease/Mortgage State Date	Type of Building
Landlord or Mortgage Holder's Fax and Email Address (if available)			Square Footage
Monthly Lease or Mortgage Payment		Length of Lease/Mortgage Contract	

Are you behind with lease or mortgage payments? If Yes, please provide outstanding amount due and months behind:

**CURRENT BUSINESS CASH ADVANCE**

Does the Business currently have out a business cash advance? If Yes, please provide the name of your current provider, the outstanding balance due, the original approval amount, the total payback amount, and the holdback percentage or fixed payment amount:

In regards to your current business cash advance, were you a slow paying client or did you use a side credit card terminal that your current provider was unaware of, extending the payback period longer than originally estimated?

**OWNER INFORMATION**

Principal Number One Name:		Ownership Percentage:
Principal Home Address:		City, State, and Zip Code:
Rent or Own Residence?	Social Security Number:	Date of Birth:
Driver's License Number/State:	Cell Phone:	Principal Email Address:
Ever declared bankruptcy? If Yes, please provide type of bankruptcy, bankruptcy filing date, and date of dismissal/discharge:		
Principal Number Two Name (if applicable):		Ownership Percentage:
Principal Home Address:		City, State, and Zip Code:
Rent or Own Residence?	Social Security Number:	Date of Birth:
Driver's License Number/State:	Cell Phone:	Principal Email Address:
Ever declared bankruptcy? If Yes, please provide type of bankruptcy, bankruptcy filing date, and date of dismissal/discharge:		

**BUSINESS TRADE REFERENCES**

SUPPLIER COMPANY NAME	CONTACT NAME	CONTACT PHONE	CONTACT FAX
SUPPLIER COMPANY NAME	CONTACT NAME	CONTACT PHONE	CONTACT FAX
SUPPLIER COMPANY NAME	CONTACT NAME	CONTACT PHONE	CONTACT FAX
SUPPLIER COMPANY NAME	CONTACT NAME	CONTACT PHONE	CONTACT FAX

Are you currently behind on payments with any one of your Suppliers? If Yes, please provide outstanding amount due and months behind:

**BUSINESS BANK REFERENCE**

BANK NAME	BANK BRANCH	ACCOUNT NUMBER	TYPE OF ACCOUNT
BANK ADDRESS	CITY	STATE	ZIP CODE
CONTACT NAME		CONTACT PHONE	CONTACT FAX

**TAX LIENS AND JUDGMENT LIENS**

Any outstanding or potential tax liens or judgment liens against the business or any of its' principals? If Yes, please provide information on the type of tax lien or judgment, the payment plan arrangement, and the outstanding amount due:

## FUNDING PREFERENCES AND NEEDS

How much are you looking to borrow?

What is the purpose of the funds?

Do you prefer a shorter payback period (6 – 9 months) to receive the lowest cost for capital, or do you prefer a longer payback period (10 – 15 months) to receive the lowest payment schedule?

If it comes to a point in the deal where switching over your credit card processing is required or preferred, is the business in a position to switch over the credit card processing or do you prefer not to switch over the credit card processing? (If you don't accept credit cards just write "N/A" in response to this question)

How fast are you looking to receive the funding? What date do you expect to receive the funds by?

## AUTHORIZATION AND SIGNATURES

**We authorize 1ST CAPITAL LOANS, LLC along with its financial partners and lenders, to acquire available financial, credit, and business data regarding our application from data sources including credit reporting agencies, suppliers, vendors, etc. This authorization also includes the release of any consumer credit data that might be available as permitted by the Fair Credit Reporting Act. Our authorization signifies our acknowledgement that the information gathered will be used for evaluating our credit worthiness.**

**Business Name:** \_\_\_\_\_

**Principal 1 (printed):** \_\_\_\_\_

**Principal 2 (printed):** \_\_\_\_\_

**Principal Signature 1:** \_\_\_\_\_

**Principal Signature 2:** \_\_\_\_\_

**Date:** \_\_\_\_\_