

## **FUNDING APPLICATION**

EMAIL: info@ascherventure.com TELEPHONE: 305.450.5399

AGENT:

The Business			
DBA Name:		Legal Name:	
Type of Business:		Fed ID#:	Corp / LLC/ Sole Prop
Bus. Address:		City / State / Zip:	
Billing Address (if different)		City / State / Zip:	
Phone at Location:	Preferred	Phone:	Fax:
Bus. Email:	Website:		
Years in Business:			Average Ticket \$:
Do You Have a Cash Advance	e\$:	With Who?:	Balance:
Avg Monthly V/MC \$:	Avg AME	X:	Gross Annual Sales:
Current Credit Card Processor			Requested amount \$
Owners / Officers			
1st Owner Name:			Date of Birth:
SS#:		Percent Ownershi	p:
Home Address:		City / State / Zip:	
Home Phone:		ne:	Own / Rent Yrs There:
Drivers Lic#:	State:		Personal Email:
2nd Owner Name:			Date of Birth:
SS#:		Percent Ownershi	p:
Home Address:		City / State / Zip:	·
Home Phone:		ne:	Own / Rent Yrs There:
Drivers Lic#:	State:		Personal Email:
Business Location			
Lease or Own:	erm on Lease:		Monthly Rent:
Landlord or Mortgage Co:		Contact:	Phone #:
Email:			Cell#:
References			
Bank Name: Bi	ranch:	Phone:	Contact:
Trade #1		Phone:	Contact:
Trade #2		Phone:	Contact:
Trade #3		Phone:	Contact:
Are there any pending, threatened or recently filed claims judgments or liens?			
Are you contemplating a bankruptcy filing? Reorganization? Sale of the Business?			
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/our 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 Evergreen Gateway LLC 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/our credit profile from time to time in the future, as you deem appropriate.  By signing below, each of the above listed Business Applicant and Principal Owner (individually and collectively, "you") authorize "ASCHER CAPITAL ("ASCHER CAPITAL") and each of its representatives, successors, assigns and designees that may be involved with or acquire purchases of future receivables including Merchant Cash Advance transactions ("Recipients") to obtain consumer or personal and business reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian, and Equifax, and from other credit bureaus, banks, creditors and other third parties (1) to review the transaction you have applied for, including to authenticate your identity, verify information in your application, make underwriting decisions, and for related purposes, and (2) if your application results in your entering into any transaction with any of the Recipients, to service, monitor, collect and enforce the transaction. You also authorize "ASCHER CAPITAL", as agent for the Recipients, to transmit this application form, along with any of the foregoing jurposes. You also consent to the release, by any creditor or financial			
Signature #1:		Signature #2:	
Date:		Date:	<u>_</u>