

**PLEASE NOTE:**

This application form conveys your interest in pursuing Merchant Cash Advances (also called "business cash advances"). A Sales Representative will contact you to complete this Merchant Cash Advance application process.

To be eligible for review, your business must process a minimum of \$5,000 per month.



# Merchant Cash Application

<b>Company Name</b>					
<b>Contact Name</b>					
<b>Address 1</b>					
<b>Address 2</b>					
<b>City</b>				<b>State</b>	
<b>Zip Code</b>					
<b>Phone Number 1</b>		<b>Ext.</b>		<b>Phone Number 2</b>	
<b>Ext.</b>					
<b>Fax Number</b>		<b>Best day of the week to contact you (Check 1 box)</b>			<b>Best time to contact you (Circle 1)</b>
		<input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday			: AM or PM
<b>E-mail Address</b>					
<b>Operating Since [mm/yyyy]</b>			<b>Type of Business</b>		
<b>Yearly Gross Sales</b>					
Check 1 Box					
<input type="checkbox"/> Less than \$500,000		<input type="checkbox"/> \$500,000 - \$1 Million		<input type="checkbox"/> \$1 Million - \$2.5 Million	
<input type="checkbox"/> \$10 Million - \$20 Million		<input type="checkbox"/> \$20 Million - \$50 Million		<input type="checkbox"/> \$2.5 Million - \$5 Million	
				<input type="checkbox"/> \$5 Million - \$10 Million	
				<input type="checkbox"/> Greater than \$100 Million	
<b>Monthly Visa/MC Sales</b>					
Check 1 Box					
<input type="checkbox"/> 0 - \$1,700		<input type="checkbox"/> \$1,700 - \$5,000		<input type="checkbox"/> \$5,000 - \$10,000	
<input type="checkbox"/> \$30,001 - \$40,000		<input type="checkbox"/> \$40,000 - \$50,000		<input type="checkbox"/> \$10,001 - \$20,000	
				<input type="checkbox"/> Greater than \$100,000	
<b>How did you hear about us?</b>					
<b>Additional Comments</b>					
<b>Signature</b>		<b>Print Name</b>		<b>Date (mm/dd/yyyy)</b>	

The above information, together with any accompanying financial statements, schedules, or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. Hampton Ridge Financial is hereby authorized to investigate (directly or through an agent or nominee) our credit and financial responsibility. By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Hampton Ridge Financial or its designee authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal, or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application. I/we confirm that no petition for bankruptcy has been filed under the company or on an individual basis and that no open liens/judgments exist against the company or on an individual basis