

Please Fax Completed Application to 603.280.4778 or email to application@gofusioncapital.com

Company Information				Principal 1 Owner Information	
Legal Business Name:				Principal 1 Name:	
Business DBA:				Job Title:	% Owned:
Primary Contact:				Phone:	Mobile:
Title:				Email:	
Business Address:				Home Address:	
City, State & Zip:				City, State, Zip:	
Business Phone:		Fax:		Date of Birth:	
Federal Tax ID/EIN:				Social Security Number:	
Business Industry:				Signature:	
Business Start Date:		# of Emp.		Date:	
State of Incorporation				Principal 2 Owner Information	
Business Type:				Principal 2 Name:	
Sole Prop	LLC	S-Corp	Corporation	Job Title:	% Owned:
Partnership	LLP/LP	Non-Profit	Municipal	Phone:	Mobile:
Annual Gross Sales:				Email:	
Accept Credit Cards:		Yes No		Home Address:	
Monthly Avg Credit Card Sales:				City, State, Zip:	
Rent or Own Business Location:				Date of Birth:	
Landlord Name:				Social Security Number:	
Phone:				Signature:	
Finance Request:				Date:	
Working Capital Amount Request:				Additional Information	
Purpose:				Date Needed By:	
Equipment Being Purchased:				Equipment Location:	
Financing Amount Request:				Brief Description of Business Function:	
Vendor/Seller Name/Company:					
Phone:		Email:			

AUTHORIZATIONS Delivery of this application bearing a facsimile signature(s) shall have the same force and effect as if the application bore an inked original signature(s). The Company/Merchant and Owner(s)/Principal(s) identified above, (individually an 'Applicant') each represents, acknowledges and agrees that (1) all information and documents provided to Fusion Capital Corporation including credit card processor statements and business bank statements are true, accurate and complete. (2) Applicant will immediately notify Fusion Capital Corporation of any changes in such information or financial condition. (3) Applicant authorizes Fusion Capital Corporation to disclose all information and documents that Fusion Capital Corporation may obtain including credit reports to other persons or entities (collectively, "Assignees") that may be involved with or acquire commercial loans and/or Merchant Cash Advance transactions or documents with other Assignees, in connection with potential Transactions, (4) each Assignee will rely upon the accuracy and completeness of such information and documents. (5) Fusion Capital Corporation, Assignees, and each of their representatives, successors, assigns and designees (collectively, "Recipients") are authorized to request and receive any investigative reports, credit reports, statements from creditors or financial institutions, verification of information, or any other information that a Recipient deems necessary. (6) Applicant waives and releases any claims against Recipients and any information-providers arising from any act or omission relating to the requesting, receiving or release of information, and (7) each Owner/Principal represents that he or she is authorized to, and does, sign this form on behalf of Merchant/Company (i.e. as well as in such Owner/Principal's individual capacity). Applicant acknowledges that, based upon such information and other factors which may apply, a Recipient, in its sole discretion, may either approve or decline a proposed Transaction. By signing above, Applicant agrees to receive communications from Recipients via the email address(es) and/or fax number(s) provided above. Any Applicant that provides a mobile device number expressly agrees to receive prerecorded messages and/or text messages at that number from Recipients or their agents, including with the use of an automatic dialer (autodialer). Standard text messaging rates may apply.