

ECheck Merchant

a Division of Gulfco Leasing LLC.

PHONE 866-598-1215 FAX 708-361-2958

Application Form

www.echeck-merchant.com

- If you are applying for individual credit in your name and are relying on your own income or assets and not the income of assets of another person as the basis for repayment, complete Owner Information (1) and omit Owner Information (2).
- If this is an application for joint credit with another person, complete Owner Information (1) and (2).

| |
|------------------------|
| Date: |
| Partner ID: |
| Intended Use of Funds: |

Company Information

| | |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Legal Company Name: | Legal Entity: <input type="radio"/> Corporation <input type="radio"/> LLC <input type="radio"/> General Partnership <input type="radio"/> LLP <input type="radio"/> Other |
| State of Incorporation: | |
| Tax ID: | |
| Physical Address: | Company Type/Industry: |
| City/State: Zip Code: | Annual Business Revenue: |
| Company Phone: | Monthly Credit Card Volume: |
| Business Inception Date: | Merchant Processor Name: |

Owner Information (1)

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|-------------------------------------------------------------------|
| Full Legal Name: |
| Years as Owner: |
| Home Address: <i>No PO boxes or mailing addresses, please.</i> |
| City/State: |
| Zip Code: |
| Home Phone: |
| Cell Phone: |
| % Ownership: |
| Social Security No: |
| Date of Birth: |
| E-mail Address: |
| Driver's License #: |
| State of Issue: |
| Years at Current Address: |
| Annual Income: |
| Other Income \$/per: |
| Source(s) of other income: |

Owner Information (2)

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|-------------------------------------------------------------------|
| Full Legal Name: |
| Years as Owner: |
| Home Address: <i>No PO boxes or mailing addresses, please.</i> |
| City/State: |
| Zip Code: |
| Home Phone: |
| Cell Phone: |
| % Ownership: |
| Social Security No: |
| Date of Birth: |
| E-mail Address: |
| Driver's License #: |
| State of Issue: |
| Years at Current Address: |
| Annual Income: |
| Other Income \$/per: |
| Source(s) of other income: |

By Signing and faxing or emailing us your Loan Application, you certify that (i) you are authorized to apply on behalf of the company whose full legal name appears above under the Company Information portion of the Loan Application for a business loan from us and (ii) all information you provide within the Loan Application and other supporting documents is true and complete and that you will notify us of material changes to such information. You understand and agree that we and our agents and assignees are authorized to contact third parties to make inquiries in evaluating your Loan Application (including requesting business and personal credit bureau reports from credit reporting agencies and other sources) or for any update, renewal, extension of credit bureau's name and address/ You understand and agree that we may provide credit and other information from the Loan Application and on the signing individual(s) and the company with third parties who may use the information for any lawful purpose, including for the purpose of offering credit and/or other products and services to the signing individual(s) and/or the company.

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|------------------------|
| Loan Information |
| Loan Amount Requested: |
| Signature (1): |
| Signature (2): |