



Exectras

5819 South Highway 6, Ste 255
Missouri City, TX 77459
Phone: 888-534-6102

BizCash Application

Rep. Name	Rep. Phone
Term Requested: <input type="checkbox"/> 6 Months <input type="checkbox"/> 12 Months <input type="checkbox"/> 24 Months	Amount Requested

Business Information

Legal Business Name			E-mail Address		
Doing Business As (DBA) Name			Website Address		Monthly Revenue
Address			Contact Person (If different than the owner)		
City	State	Zip Code	Type of Business	No. of Employees	Check Volume
Business Phone	Fax Number		Federal Tax ID	Date Biz Started	Cash Volume
Mobile Phone	Customer Service Phone		Current Merchant Processor		Total Monthly Revenue

Ownership Type:

Sole Proprietor Partnership Non Profit Corporation LLC

If you have checked Corporation or LLC, what state were you incorporated in?

State

Owner 1 Information

Owner 2 Information

Name			Ownership %			Name			Ownership %		
Title			Date of Birth			Title			Date of Birth		
Home Address (No P.O. Boxes)						Home Address (No P.O. Boxes)					
City	State	Zip	City	State	Zip	City	State	Zip	City	State	Zip
Home Phone		Years at Residence		<input type="checkbox"/> Own <input type="checkbox"/> Rent		Home Phone		Years at Residence		<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Drivers License Number		DL State	Social Security Number			Drivers License Number		DL State	Social Security Number		

Business References

Note: Use Accountants, Lawyers or Vendors.

Company Name	Contact Person	Email Address	Phone
Company Name	Contact Person	Email Address	Phone

Business Property Information

Property <input type="checkbox"/> Own <input type="checkbox"/> Lease	Lease Start Date	Lease Term Remaining months	Monthly Rent/Mtg	Square Footage (Approx)
Landlord or Mortgage Company		Contact Name	Phone Number	

Bank Information

You authorize us and our affiliates to present Automated Clearing House credits, Automated Clearing House debits, wire transfers, depository transfer checks and other similar forms of monetary transfers from and to the following account for the purposes as set forth in the documents that are entered into between you and us. This authority is to remain in full force and effect during the term that you do business with us.

Name on Checking Account	Bank Name
Account Number	ABA/Transit Number

Questions

Additional Questions:

Please answer all the following questions with respect to all parties covered by the BizCash Application above.

01	Is the business past due on any bills, sales tax, rent, or mortgages?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please describe	
02	Are you currently aware of any reason or circumstances that will make it likely that your business will cease operations or file for bankruptcy protection in the next 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please describe	
03	Do you have any OPEN Loans or Merchant Cash Advances for your business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please name company, amount still owed	
04	Have you ever received a Loan or a Cash Advance against your Visa/MC Sales before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please name company and amount	
05	Do you have any State or Federal Tax Liens against you personally or your business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please give agency and amount owed	
06	Is your business seasonal?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, what are your busy months?	What are your slow months?
07	Have you ever been arrested or charged with a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
08	Have you ever been under investigation by any government agency?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
09	Are any assets listed herein held under a trust agreement of any type, held in estate, or in any other name or capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
10	Do any of your assets secure any debts which have not been reported on your financial statements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
11	Are any of the assets listed herein located in the community property states of Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas or Washington?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, which state(s)	
12	Have you ever filed for personal bankruptcy, had property you owned foreclosed, or made a settlement or an assignment for the benefit of creditors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
13	Has any corporation or partnership in which you are (were) a major owner or general partner ever filed for bankruptcy, had property it owned foreclosed, or made a settlement or assignment for the benefit of Creditors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
14	Are you, or any corporation or partnerships in which you are an owner or general partner, a party to any suit or legal action, or are there any unsatisfied judgments, or potential litigation against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
15	Personal Income Tax Returns have been filed through (year):		If Yes, please explain	
	Are any income tax returns, whether personal or that of any corporation or partnership in which you are an owner or a general partner, currently being audited or contested?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
16	Do you have any Contingent Liabilities? Contingent Liabilities are defined in the Contingent Liabilities section below. If you answer yes, you must complete this section.	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain	
17	I (we) have made a will?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, who is the executor	

Contingent Liabilities

Instructions:

State total amount by type of liability and provide appropriate detail in the space below.

Contingent liabilities are financial obligations of other individuals, partnerships, or companies which you have endorsed, guaranteed or otherwise agreed to or have a statutory obligation to honor in the event of certain contingencies and any direct obligations that you will be required to honor in the event of certain contingencies. These include obligations to other banks of creditors of any kind. You must disclose all such guarantees, endorsements, etc. in this schedule.

- 01.** As Guarantor or Endorser
 03. Legal Claims or Judgements
 05. Standby Letter of Credit
 02. On Leases or Contracts
 04. Income Tax Claim or Dispute Amount
 06. Other

Type Number	Name of Primary Obligor	Due To	Max Legal Obligation Amnt	Maturity	Explanation: Include whether you anticipate having to honor this liability

Use of Proceeds

Please describe use of funds in detail

Comments or Additional Remarks

Acknowledgement & Agreement

As part of the application process, you understand that we may request a credit report or an investigative consumer report about you. You understand that the nature and scope of this investigation may include information from public and private sources concerning, among other things, your driving record, civil and criminal court records, credit, education history, credentials, identity, past addresses, social security number, previous employment, and personal references. You understand that your consent will apply throughout the time you do business with us and that we or our affiliates are allowed to periodically run credit reports as we deem necessary in our sole and absolute discretion.

The Undersigned (I/We) herewith submit the attached financial and supporting schedules which constitute my (our) financial statement. This statement is submitted to you for the purpose of inducing you to extend or maintain credit to me (us). I (we) certify that the attached Application and any financial statements presents a true, complete, and correct statement of my (our) financial condition as of the date shown and does not omit any pertinent information. I (we) understand that misrepresenting information on the attached statement is a criminal offense under federal law.

I (we) will notify you promptly in writing of any material unfavorable change in my (our) financial condition. In the absence of such notice, you may consider this a continuing statement and substantially correct. If I (we) apply for further credit, this statement shall have the same force and effect as if delivered as on original statement of my (our) financial condition at the time I (we) request such further credit. You are hereby authorized to contact credit reporting agencies.

Signature No.1	Title	Date
Signature No.2	Title	Date