



BUSINESS LOAN APPLICATION

General Business Information

Business Tax ID#	Complete Legal Business Name	DBA
Business Street Address (No P.O. Boxes please)	City	State/ZIP
Business Phone	Business Fax	
Business Website	Business Email	

Type of Business (please check one)

- | | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance | <input type="checkbox"/> Service |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Health | <input type="checkbox"/> Wholesale |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Education | <input type="checkbox"/> Retail | |

Description of Business (please be specific, e.g., car dealership)

Business Structure (please check one)

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> S Corporation | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Sole Proprietor | |

Business Operations

Month and Year Business was Established	Number of Employees (including you)	Amount Expected in Cash \$
Amount expected in Checks \$	Amount Expected in Credit Cards \$	Expected Average Monthly Income \$

Business References (Please provide two references, either vendors or customers)

<input type="checkbox"/> Vendor	<input type="checkbox"/> Customer	If Vendor, Name of Company	Name	Phone Number	Years Affiliated
<input type="checkbox"/> Vendor	<input type="checkbox"/> Customer	If Vendor, Name of Company	Name	Phone Number	Years Affiliated

Business Owner(s)

SSN	Name	Home Address			
City	State/ZIP	Phone	Email		
Date of Birth	Title	% of Ownership			
SSN	Name	Home Address			
City	State/ZIP	Phone	Email		
Date of Birth	Title	% of Ownership			

Your Signature

You must be one of these (please check one) Owner or Sole Proprietor General Partner President Vice President Other Officer

NOTICE TO APPLICANT Please read this statement before signing.

By signing below, you are applying, on behalf of your business, for credit from Moneytree, Inc. ("us" and "we"). You represent that your business is a valid business entity; that all Business Loans we may make to your business will be used solely for business purposes and are not for personal, family or household use; and that you are an authorized representative of the business with authority to enter into this agreement. On behalf of the business, you certify that all information provided in this Application is complete and accurate. You agree that the terms of the Business Loan Agreement will govern your loan and you authorize us to obtain information about you personally and your business from credit reporting agencies and other sources we deem appropriate in considering this Application and subsequently for purposes of updates, renewals or extensions of credit granted as a result of this Application or in making or collecting any Business Loan made to your business.

Federal law requires us to obtain, verify and record information that identifies your business when you open an Account on its behalf. We will use the name, address, taxpayer ID number, and other information from your business for this purpose.

Signature of Company's Authorized Representative

Signature _____ Printed Name _____ Title _____

Company Name _____ Date _____



Do you need instant cash for checks made payable to your business? **We can help!**
Ask us about our special business check cashing rates!