

## Business Information

Legal Business Name		Doing Business As Name (DBA)	
Business Address			
City		State	Zip
Business Phone		Business Email	
Legal Business Structure (Select One) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other			Business Start Date (MM/DD/YYYY)
Business Type / Services Provided		Landlord Name	Landlord Phone

## Business Financial Information

Federal Tax ID Number (9 digits)		State of Incorporation	
Requested Funding Amount		Purpose of Funds	
Do you currently have a cash advance balance open with another company? <input type="checkbox"/> Yes <input type="checkbox"/> No          if yes, Provide Details below			
Company 1	Current Balance	Date Received	
Company 2	Current Balance	Date Received	

## Principal Owner Information #1

First Name		Last Name		Percent Ownership (%)	
Home Address					
City		State	Zip		
Birthdate (MM   DD   YYYY)		Social Security Number			
Phone Number			Email		

## Principal Owner Information #2

First Name		Last Name		Percent Ownership (%)	
Home Address					
City		State	Zip		
Birthdate (MM   DD   YYYY)		Social Security Number			
Phone Number			Email		

The Business Applicant and each Principal, person or entity signing this Application or an Application Addendum Form ("Signer") represents, acknowledges and agrees as follows: (i) all information provided to CSHE, LLC, Capital Markets Group and [or] their corporate affiliates (collectively "Capital Markets Group") by Signers is true and complete; (ii) in the event Capital Markets Group declines to extend financing to the Business Applicant, Signers authorize Capital Markets Group to disclose all information and documents that Capital Markets Group may obtain regarding Signers (whether from Signers or third parties) to other persons or entities that are under contract with Capital Markets Group for the purpose of providing financing to applicants that Capital Markets Group does not provide financing (collectively "Recipients"); and (iii) Signers authorize Capital Markets Group and Recipients to:

1. obtain credit and employment information about the Signers;
2. obtain credit reports and make any inquiries Capital Markets Group and Recipients consider appropriate in connection with this Application or reviews of the Applicant's account from time to time;
3. disclose account information as required by law. Each Signer acknowledges that additional information may be required in order to render a decision regarding Business Applicant's account and Signers hereby certify that they have read and understand the terms of this Capital Markets Group Application Form.

EACH SIGNER ACKNOWLEDGES THAT CAPITAL MARKETS GROUP MAY RELY ON THE STATEMENTS AND INFORMATION SET FORTH IN THIS APPLICATION AND THAT SUCH STATEMENTS AND INFORMATION MAY BE INCORPORATED BY REFERENCE IN ANY AGREEMENT ANY OF THE UNDERSIGNED MAY ENTER INTO WITH CAPITAL MARKETS GROUP. EACH OF THE UNDERSIGNED HEREBY AGREES TO NOTIFY CAPITAL MARKETS GROUP PROMPTLY OF ANY CHANGE IN ANY SUCH STATEMENT OR INFORMATION. EACH SIGNER HAS READ AND UNDERSTANDS THE TERMS OF THIS APPLICATION, INCLUDING ANY ADDENDUM, AND REPRESENTS AND WARRANTS THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

By signing this Application, you authorize Capital Markets Group and prospective third party funding providers to contact you at the numbers you provide (including mobile) during any step of this application, via phone (including automated telephone dialing system, prerecorded, SMS and MMS means) even if you are on a Do Not Call Registry. You are not required to agree to be contacted in this manner to use Rapid Finance's services.

Applicant's Signature	Print Name	Date
Co-Applicant's Signature	Print Name	Date