info@tramfunding.com



(212) 717-9000

FUNDING APPLICATION

Business Information											
Legal Name							Physical Location Phone #		Preferred	Preferred Contact Phone #	
DBA							Cell Phone #		Fax #	Fax #	
Federal Tax ID #		State of Incorporation				Email Address					
Business Start Date			Industry				Website Address				
Address							City		State	Zip Code	
Gross Annual Revenue				Average Monthly Credit Ca			d Sales	Funding Amount Requested			
Monthly Bank Deposit Volume				Average Daily Bank Balance				Use of Funds			
Accounts Receivable				Currently Factoring				Do You Invoice on Terms			
Property Type Lease / Mortgage Rent Current Mortgage Not Current Lease / Mortgage Payment Landlord Name / N				YES NO			roximate Credit Score 400-500 FICO 500-600 FICO tact Person	Type of Business Entity 600-700 FICO Corporation 700+ LLC Partnership Landlord Phone # Sole Proprietor			
Do you have outstanding loans?	Lender				Current Balanc	e\$	Original Amount \$	Payback	Amount \$	Terms	
□ NO											
Owner/Officer 1						-	wner/Officer 2		<u> </u>		
First Name			Last Name				First Name		Last Name		
Ownership %			Date of Birth				Ownership %		Date of Birth		
SSN#			Email Address				SSN#		Email Addr	Email Address	
Street Address							Street Address				
City State		Z		Zip Code		City	State		Zip Code		

By signing below, each of the above listed business and business owners/officers/members (individually and collectvely, the "Applicant") certifies that Applicant is authorized to submit this application on behalf of the above-named business. Applicant certifies that all information and documents submitted in connection with this Application are true, correct and complete and may be relied upon by TRAM Funding ("TF"). Applicant authorizes TF to share this application and all supporting documentation with each of its representatives, successors, assignees, affiliates and designees including third party lenders (collectively "Assignees"). that may be involved with the histories or hard credit pulls, and any other information regarding the Applicant and its owners and/or pricipals from third parties deemed necessary by TF or Assignees to verify any information provided on the Application including without limitation credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. TF shall not disclose information relating to Applicant, to TF and to each of the Assignees to marketing purposes by TF and/or therty party lenders, as well as their respective affiliates and processes, by any credit or financial institution, of any information relating to Applicant, to TF and to each of the Assignees, on its own behalf. The applicant also consents to email and/or text/SMS/fax messages at the phone number(s) provided above, including your wireless number, using an automated telephone dialing system for marketing purposes by TF and/or third party lenders, as well as their respective affiliates or agents acting on their behalf. Furthermore, Applicant hereby waives and releases any claims against TF, all Assignees, on any information-providers arising from any act or omission relating to the requesting, receiving or release of the information obtained in connection with this app

Home Phone

Cell Phone

Owner/Officer 1 Print Name

Home Phone

Owner/Officer 1 Signature

Date

Cell Phone