


Merchant **Pre-Qualification** Form

Business Legal Name:		Business DBA Name:		
Type of Business Entity (Check One): Corporation LLC Partnership Ltd. Partnership LLP Sole Proprietor		Use of Proceeds:	Does the Merchant have any open MCA or loan accounts? Yes No	Amount Requested:
Industry Type: (Describe)	State of Incorporation	Business Start Date of Current Ownership:	Merchant Email Address	
Business Physical Street Address:	City:	State:	Zip Code:	Physical Location Phone #:
Billing Street Address:	City:	State:	Zip Code:	Billing Location Phone #:
Business Location(s): Rented Mortgaged	Name of Credit Card Processor	Credit Card Processing?	Gross Annual Sales (from previous year's Tax return):	
Monthly Payment:	# of FT & PT employees /	Business EIN#:		
Owner First Name	Social Number SSN#:	Date of Birth:	Primary Contact Number:	
Last Name:	City:	Zip Code:	Credit Score:	
Street Address:				

Do you own Real Estate: YES NO

Is the Real Estate BUSINESS or PERSONAL asset(s)

AUTHORIZATIONS

Submit to info@kineticcapitalmgt.com

By signing below, each of the above listed business and business owner/officer (individually and collectively, "you") authorize [Kinetic Capital] ("KC") and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transactions, including without limitation the application therefor (collectively, "Transactions") to obtain consumer or personal, business and investigative reports and other information about you, including 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. You also authorize DC to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to DC and to each of the Recipients, on its own behalf. CONSENT TO TELEPHONE CALLS: You expressly consent to receiving marketing and other calls and messages, to landline, wireless or similar Devices, including auto .. dialed and pre-recorded message calls, and SMS messages (including text messages) from Recipients, at telephone numbers that you have provided. Message and data rates may apply. Your consent to receive marketing is not required for your application; if you do not consent do not provide phone number. CONSENT TO ELECTRONIC DISCLOSURES: You expressly consent to transactions and disclosures with Recipients online and electronically. Disclosure will be provided to you either on the screen, on Recipients website or via electronic mail to the email address you provided.

K I N E T I C C A P I T A L

Owner / Officer's Signature: X _____ X _____ Date (M/D/YY)

Owner / Officer's Name: (Print) X _____ Application Checklist: 1. Month-to-Date Banking
2. Banking 4 recent months

Co-Owner / Officer's Signature: X _____

Landlord Name: _____

Is Your Business Seasonal? Yes No

Any Open Bankruptcies? Yes No

Any Judgments/Liens Yes No

Landlord Contact#: _____

Second Owner: _____ %

Date of Birth: _____ Social#: _____

Home Address: _____

Business Trade Reference #1: _____ Phone #: _____

Business Trade Reference #2: _____ Phone #: _____