

GREEN LIGHT BUSINESS CREDIT



PRE-APPROVED Account Activation Form

Business Information					
Business Legal Name:			dba:		
Address:			Phone:	FED TAX ID #:	
City:	State & Zip		Fax:	Website:	
Email:			2017 Sales:	Time in Business:	
Business Description/SIC:			Credit Amount Needed:		
Entity Type: <small>PLEASE SELECT FROM THE DROP DOWN MENU!</small>					
Type of Product Sold/Service :					
Business Location and Property Information					
Landlord/Mortgage Company:			Rent/Own?:	Phone:	
Rent/Mortgage Payment:			Mortgage or Lease Term?:		
Majority Ownership and Shareholder Information					
Name (Primary Owner):			Name (2nd Owner):		
Title:	% of Ownership:		Title:	% of Ownership:	
Date of Birth:	Rent or Own?		Date of Birth:	Rent or Own?	
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Cell Phone:	SSN#:		Cell Phone:	SSN#:	
Business Information					
2018 Projected Sales/Revenues:			Number of Locations:	# of Employees:	
Any working capital loans out?		If YES, please list the lenders here:			
What is the total payoff amount?:					
How will you use this new funding?:					

The Client and Owner(s)/Officer(s) identified above (individually, an "Applicant") each represents, acknowledges and agrees that (1) all information and documents provided to the funding source are true, accurate and complete, (2) Applicant will immediately notify the funding source of any change in such information or financial condition, (3) Applicant authorizes the funding source to disclose all information and documents that the funding source may obtain including credit reports to other persons or entities (collectively, "Assignees") that may be involved with or acquire commercial loans. Applicant waives and releases any claims against Recipients and any information-providers arising from any act or omission relating to the requesting, receiving or release of information, and (4) each Owner/Officer represents that he or she is authorized to sign this form on behalf of Merchant.

Primary Owner Signature: _____ Date: _____

2nd Owner Signature: _____ Date: _____

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