

Business Name:					
Physical Address:		City:		State:	Zip:
Phone:		Cell:			
$\textbf{Legal Status:} \ \square \ \textbf{Corporation}$	☐ Partnership ☐ Proprieto	rship 🗌 LLC	Federal Tax II	D #:	
MC Number (If Applicable):	DOT	Number (If Appli	cable):	State of Inco	rporation:
Year Incorporated:	_ Anticipated Monthly Factoring	y Volume:	Nature of B	usiness/Type of \	Work:
<b>Current Financing</b>					
, ,	loans or lines of credit?		Are you curre	ntly factoring?	]Yes ☐ No
Banking Info					
Name of Bank:	Date	Account Opened	d:	Number of A	Accounts:
Business Checking Account N	Number:	Do you m	naintain a separate ¡	payroll account?	☐ Yes ☐ No
Contact Person:	Phone:		CPA Contact	Info:	
Tax Info					
How often do you pay 941 Pa Are your Federal/State payrol Have any tax liens been filed? Are there any judgments or lie	r PEO Service?  Yes No ayroll Taxes:  Weekly Mo Il taxes current?  Yes No ?  Yes No Are you curren ens filed against you, any comp	onthly Quar If no, please tly obligated to a any principles, o	terly Annually list type, amount an ny Installment Agrerr the corporation?	d quarters delino	
Officer/Principle Info					
	SS#:		Driver's Lie	ance #:	
	00#				
	Ownership %:				
Officer/Principle Info					
Full Name:	SS#:		Driver's Lice	ense #:	
Email:	Ownership %:	Filed Bankru	ıptcy? 🗌 Yes 🗌 N	Date of Birth: _	
Support Documentation					
Please provide the following s	supporting documents with your	application:			
Copy of Articles of Incorpo	oration/Organization (showing le	gal Acc	ounts Receivable/Pa	ayable Summary	,
business name). Please a	Cer	Certificate of Insurance			
Copy of Operating Agreem	☐ A W	A W-9 Form and Sample Invoice			
Document that governs co	☐ Cop	Copy of driver's license & voided check			
Motor Carrier Authority or US DOT Paperwork					
but does not obligate Momentum to documentation. All statements made regarding employment, bank accouncial credit reporting agency, busines payment of any amounts owed to M (including all accounts and inventory	b Momentum Capital Funding, LLC (Mo provide any such financial services, a eherein are true and correct in all responts, and/or other credit information periods or person. This authorization includ Momentum, Applicant and all individually) and authorize Momentum to file a UC If of the Applicant in connection with the	ny such services to ects to the best of the taining to the Applicates contacting custon is signing below gracc1 financing statem	be conditioned upon cree e undersigned's knowled ant and all parties listed mers to verify invoices s nt Momentum a security	edit committee approduced to the detection of the detecti	oval and the execution of lega uthorized to obtain information sumer credit agency, comme int for factoring. To secure the eir current and future propert
Prepared and Consented By	·				
Signature:		Date:			
_		Date:			
-					