DIRECTCAPITAL® CORPORATION

Financing Application

Apply By Phone
To apply by phone, please call
Dillon Tagget at (603) 373-1914

Apply By Fax
To apply by fax, please complete this
application and fax to: (603) 373-1814

COMPANY INFORMATION

COMPANY NAME:

CONTACT/TITLE:

ADDRESS:

CITY: STATE: ZIP:

BUSINESS PHONE: FAX#:

CELL PHONE:

FEDERAL TAX ID:

COMPANY TYPE / INDUSTRY:

TIME IN BUSINESS: # OF EMPLOYEES:

TIME IN BUSINESS UNDER CURRENT OWNERSHIP:

BUSINESS TYPE:

☐ PARTNERSHIP ☐ S-CORP. ☐ SOLE PROP ☐ MUNICIPAL
☐ LLC ☐ CORPORATION ☐ NON PROFIT

DO YOU RENT OR OWN YOUR BUSINESS LOCATION:

IF RENT, LANDLORD NAME:

LANDLORD PHONE:

ANNUAL REVENUE:

AVERAGE BANK BALANCE:

MONTHLY CREDIT CARD SALES VOLUME:

PRINCIPAL OWNER'S INFORMATION

PRINCIPAL I NAME:

HOME ADDRESS:

CITY: STATE: ZIP:

SOCIAL SECURITY#: BIRTH DATE:

PHONE#: % OWNERSHIP:

CELL PHONE#:

EMAIL:

SIGNATURE: **DATE:**

PRINCIPAL II NAME:

HOME ADDRESS:

CITY: STATE: ZIP:

SOCIAL SECURITY#: BIRTH DATE:

PHONE#: % OWNERSHIP:

CELL PHONE#:

EMAIL:

SIGNATURE: **DATE:**

FINANCING NEEDS

I AM INTERESTED IN:

☐ EQUIPMENT FINANCING ☐ RECEIVABLES FINANCING
☐ BUSINESS LOAN ☐ CREDIT IMPROVEMENT
☐ WORKING CAPITAL ☐ SBA
☐ DEBT CONSOLIDATION

AMOUNT NEEDED: TIMEFRAME:

EQUIPMENT TYPE (if applicable):

VENDOR (if applicable):

BANK & TRADE REFERENCES

BANK REFERENCE NAME:

BANK ACCT NUMBER:

BANK PHONE:

BANK CONTACT:

TRADE REFERENCE NAME:

TRADE REFERENCE ACCT NUMBER:

TRADE REFERENCE PHONE:

TRADE REFERENCE CONTACT:

Delivery of this application bearing a fascimile signature(s) shall have the same force and effect as if the application bore an inked original signature(s). The applicant certifies that all information provided is true, correct and complete and that the account will be used soley for business and commercial purposes. The applicant, owner(s) and guarantor (if any) authorize Direct Capital Corporation or its designee(s) or assignee(s) to obtain any information it may request from any business or consumer reporting agency(ies) or other sources that provide credit reports, account history information, credit and employment history or similar information; such authorization shall extend to update renewal or credit and for reviewing or collecting the account. The applicant acknowledges that, based upon such information and other factors which may apply, Direct Capital or its assignee(s) or designee(s), in their sole discretion, may either grant or decline to grant credit. By signing above, I agree to receive updates from Direct Capital Corp. and its partners regarding this account via the email address(es) and/or fax number(s) provided for the account above. If you provide us your mobile device number you expressly agree to receive prerecorded messages and/or text messages at that number from us and our authorized agents, including with the use of an automatic dialer (autodialer).Standard text messaging rates apply.