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LAYTON BECK

APPLICATION

BUSINESS INFORMATION

Merchant's Legal/Corporate Name:	DBA	Type of Entity
Physical Address:	City, State, Zip	Corporation LLC
Mailing Address (if different):	City, State, Zip	General Partnership LP
Telephone #:	Fax #	Sole Proprietorship S-Corporation
	Federal Tax ID	LLP Nonprofit
		Other (please specify)
Date Business Started:	Length of Ownership	Merchant's State of Formation (Legal Domicile):
		Email Address

Website Address	Credit Cards Accepted	Annual Total Sales:	Credit Card Sales as % of Total				
	<table border="0"> <tr> <td>Visa</td> <td>MasterCard</td> <td>AMEX</td> <td>Discover</td> </tr> </table>	Visa	MasterCard	AMEX	Discover		
Visa	MasterCard	AMEX	Discover				

Secured Debt	Current Balance	Name of Bank or Company	Own or Rent Location	Monthly Amount \$
Yes No			Own Rent	
Unsecured Debt	Current Balance	Name of Bank or Company	Landlord Name	Landlord Phone #
Yes No				

Funding Amount Requested: Use of Funds

OFFICER/OWNER INFORMATION - please complete additional application(s) for additional owner(s)

Corporate Officer/Owner Name	Title	Ownership %	Home Phone #	Mobile Phone #
Home Address	City, State, Zip	Birth Date	Social Security #	
Own / Rent	Years There	Driver's License #	State	
Own Rent				

TRADE REFERENCES

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

Applicant hereby authorizes LAYTON BECK, its assigns, agents, banks or financial institutions to obtain an investigative or consumer report from a credit bureau or credit agency and to investigate the business information given in any other statement or obtained from the applicant. Applicant, by signing below, represents that all the information contained herein is complete and accurate.

Applicant Signature

Date