



MERCHANT APPLICATION

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MERCHANT INFORMATION:

Legal Business Name: DBA Name: % Ownership:
Physical Address: City: State: Zip:
Business Phone: Business Fax: Email:
Ttl Monthly Sales (cc & cash): Type of Business: Years in Business: Business Open Date:
Time Remaining on Site Lease/Mort.: Landlord/Agent Name: Landlord/Agent Phone#:
Number of Locations: 9-Digit Federal Tax ID number: Is your business for sale?
Amount Requested: Have you ever filed for bankruptcy?
Intended Use of Cash Advance: Do you have any federal or state tax liens?
Have you previously had a cash advance? Is your business seasonal?
Name of Current Merchant Advance Company/ Balance?

CREDIT CARD PROCESSOR INFORMATION:

Current Processor: Merchant Account Number:
Terminal Type currently used: Number of Terminals at Location:
Length of Time with Current Processor: Years Months

PRINCIPAL OWNER(S) INFORMATION:

Principal Owner Name: Social Security Number: D.O.B.
Home Address: City: State: Zip:
Home Phone: Mobile: Driver License #: State:
How Long at Home Address: Number of years at previous home address: Estimated Current Annual Income \$
2nd Owner Name: Social Security Number: D.O.B.
Home Address: City: State: Zip:
Home Phone: Mobile: Driver License #: State:
How Long at Home Address: Number of years at previous home address: Estimated Current Annual Income \$

Please submit the following with your application to Fax #: (678) 298-3032

- COMPLETED Application (all fields required)
LAST 6 Consecutive Merchant Processing Statements (all pages)
LAST 3 Months of Business Bank Statements (all pages of each month)
OR LAST 6 Months of Business Bank Statements If You Do Not Currently Accept CREDITCARDS

Applicant authorizes (RFG, LLC & P1F) and assigns its, agents, banks or financial institutions full disclosure rights to obtain and investigative any consumer report from a credit bureau or a credit agency. This also includes investigation of any statement or data obtained from applicant.

Applicant's Signature Date
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