

CLIENT APPLICATION

Thank you for your interest in K2 Capital

Please fill out the application and send it via e-mail to info@K2capital.com

K2 Capital will treat the information provided as confidential.

Date:											
Business Information											
Company Nam	٥.			Dusilless	IIIIO	IIIIatioii	d/b/a:				
Incorporation Dat					ax ID:						
Industr						State of Inc		tion:			
Legal Entit	-	□ Corporation						Proprieto	r	□ P:	artnership
Street Addres	_	- OO.F	poration LLC				City / County:		•	<u> </u>	шиноготпр
Stat			Zip Code:			Oity /		untry:			
Websit				none:			-	E-Mail:			
Contact Name / Titl						Tel/Cell:					
President Nam	-	1			Tel/Cell:		_				
Secretary Nam						Tel/Cell:					
Ownership / Management											
Shareholder Name	areholder Name Shares %		I.D		I.D. Type		е	D.O.B.			Residence (State)
					31						
Financial Information											
Average monthly sales: Number of clients: Number of suppliers:											
Have you ever financed your receivables?			☐ Yes ☐ No If yes, w			with whom:					
Do you have any outstanding loan			?			With whom:		Amount:			nount:
Do you have any UCC Filing			☐ Yes ☐ No If yes, w			with whom:					
Has applicant of	r any entity in	n which ap	ch applicant is an owner / partner ever declared					kruptcy?	•		Yes 🗆 No
Has applicant or any	h applican	plicant is an owner / partner owe any taxes that a					ast due?)	□ Yes □ No		
Has applicant or any entity in which			h applicant is an owner / partner has				wsuits pending?			□ Yes □ No	
Property:			tgage payment: ☐ Current			nt □ Past Du	□ Past Due Mo		nthly Rent / Mortgage:		
				Bank Ir	nform	nation					
Account Name (benefi	ciary name):			Acc	coun	t number:			Α	BA:	
Beneficiary Addres	ss			_							
Bank Nam	e:			Bank T	el:			Acc	count Office	r:	
Bank Addres	s:										
By signing below, each of the above listed business and business owners/officers/members (individually and collectively, "you") authorize K2 Capital Commercial Lending LLC ("K2C") and each of its representatives, successors, assignees, affiliates and designees (collectively "Recipients") that may be involved with the acquiring of commercial loans and/or other products that have daily repayment features for the purchase of future receivables, including Merchant Cash Advance transactions, including without limitation the application therefore (collectively, "Transactions") to obtain consumer or personal business and investigative reports and other information about you, including without limitation credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize K2C to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes; however, K2C shall not disclose information in your credit report to third parties. You also consent to the release, by any credit or financial institution, of any information relating to you, to K2C and to each of the Recipients, on its own behalf.											
Applicant's authorized signature:											
	Nan	ne:									