



Liberty Capital

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Business Verification Form

Business Information		Legal Entity: ☐ Sole Prop ☐ Partnership ☐ LLC ☐ Corporation		State of Incorporation:	
Business Legal Name:			Business DBA Name:		
Business Physical Address:			City:		State: Zip:
Business Phone:			Company Website:		
Business Fax:			Type of Business:		
Federal Tax ID:			Business Start Date Month:		Year:
Merchant Type: ☐ Retail ☐ Restaurant ☐ Service ☐ Other			Annual Gross Revenue (Not net profit/loss):		
Business Office Location: ☐ Store Front ☐ Office ☐ Home ☐ Other			Landlord Name:		
Rent/Mortgage Payment: \$ ☐ Rent ☐ Mortgaged/Own			Landlord Phone:		
Owner Information					
Full Legal Name Owner 1:			Full Legal Name Owner 2:		
Home Address: (No PO BOX)			Home Address: (No PO BOX)		
City:		State:	Zip:	City: State Zip:	
Home Phone:		Cell Phone:		Home Phone: Cell Phone:	
% of Ownership:		Title:		% of Ownership: Title:	
Date of Birth:		SSN#:		Date of Birth: SSN#:	
Email:			Email:		
Funding Information					
Amount Requesting:			Do you have any open MCA or Loan? ☐ YES ☐ NO		
Use of Capital:			Who is your current MCA or Loan Lender:		
If purchasing equipment, please provide Year, Make, Model and equipment description below: ☐ New ☐ Used ☐ Vendor/Dealer ☐ Private Party					
Seller's Contact Info:			Phone:		
By signing below, each of the above listed business and business owner/officer (individually and collectively, "you" and/or "applicant") authorize Liberty Capital Group, Inc. (LCG) and each of its affiliates, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily, weekly or monthly repayment features or purchases of future receivables including Merchant Cash Advance, including without limitation the application therefor (collectively, "Transactions") to obtain personal and business and investigative reports and other information about you, including 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 LCG 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. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to LCG and to each of the Recipients, on its own behalf. I understand that this information may be transmitted by us to you and by you to recipient(s) for the purpose of granting to me credit, either <u>electronically or manually</u> and that by submitting this application and I take full responsibility for transmission thereof. I also consent to receiving <u>unsolicited faxes, mobile texting (SMS/MMS) and email</u> wherein the involved agency will advocate its services. I acknowledge my rights under the Fair Credit Reporting Act and The Patriot Act which now requires two forms of Identification and Date of Birth. California loans are made pursuant to Liberty Capital's California DBO LIC #60DBO49692. Date: _____ Date: _____ Owner/Officer's Name (Print): _____ Owner/Officer's Name (Print): _____ Owner/Officer's Signature: X _____ Owner Officer's Signature: X _____ <i>For expedited processing please fax to 888.230.3431 or email to credit@libertycapitalgroup.com</i>					