

1 Hour Fax Coversheet Checklist

Please use this convenient form to help us ensure your application is processed in our 1-hour program.

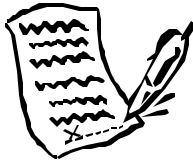
Agent Name: _____

Merchant Name: _____

Date Submitted: _____



Be sure these steps are completed before submitting to Signature



Step 1

Completed and Signed
Merchant Application
and Agreement

+



Step 2

Voided Business
Check

+



Step 3

Most recent process-
ing statement (When
Applicable)

+

Please also include ONE of the following



Option 1

(3) months of merchants
most recent processing
statements

OR



Option 2

Business License

OR



Option 3

Site Photos

FAX the completed documents to: (323) 966-0056, 0062

Time Received: _____

Signature Internal Use Only

Time Due: _____

Underwriting Dept. Contact: _____

MID Number: _____

SIC Code: _____

Notes: