



Sole Proprietor Commercial Check Cashing Application Packet

Thank you for choosing David's Financial as your commercial check casher. We will strive to make your experience with us courteous and efficient. We go the extra step to cash your check.

The New York State Banking Department requires that we gather certain information from our customers. This information is completely confidential and is only available for inspection by the NYS Banking Department.

Please complete all information in this packet and notarize as needed. For your convenience many of our locations offer notary services, please call for more information.

Sole Proprietor

APPLICATION FOR COMMERCIAL CHECK CASHING ACCOUNT

Name of Company: _____
Address: _____
City, State, Zip: _____
Name of Contact Person: _____
Office Phone: _____ Fax Phone: _____
Cell Phone: _____ Home Phone: _____

Bank Name: _____
Bank Account Number: _____
Bank Account Officer: _____ Phone: _____

Type of Business: _____
Reason check cashing Services needed _____

Estimated monthly dollar amount of checks to be cashed: \$ _____

Please provide the following information as applicable:

1. Executed Resolution Granting Authority to Cash Company Checks (attached to this application).
2. Affidavit authorizing individual to cash checks made payable to your company (attached to this application). The affidavit must be notarized.
3. ***Business Certificate or Certificate of Assumed or Fictitious Name.***
4. Internal Revenue Service letter assigning the Entity an EIN.
5. Voided check (if available)

The undersigned, on behalf of the above-named company (_____) hereby requests a commercial check cashing account with David's Check Cashing. The account will be used for the above purposes only, and will not be used to avoid or circumvent any financial reporting requirements, conceal the nature or volume of business being conducted by the Company or for any illegal purposes of any kind.

The undersigned attests that the information provided herein is true and accurate, and hereby authorizes David's Check Cashing to conduct any reasonable background investigations or credit inquiries, contact bank account officer, provided herein, or take any other steps it deems necessary in order to satisfy itself that the Company qualifies for a Commercial Check Cashing Profile.

Signature
Print Name: _____
Title: _____

Date

Affix Seal here

Sole Proprietor

Resolution Authorizing Cashing of Checks Payable to the Company

I, _____, do hereby certify that I am a duly appointed and authorized representative of the Company acting in a capacity authorized by the by-law or other appropriate organizing agreement of the Company; that I'm the custodian of the business records of the Company; and that a meeting of the appropriate directors, owners or such representatives of the Company and in accordance with the Company's organizing agreement the following resolution was duly adopted.

Resolved:

1- Each of the following individuals named below in the capacity shown below is a designated signatory on behalf of the Company with respects to checks issue by to Company or payable to the Company and which checks are negotiated by David's, and such signatory is authorized to endorse checks made payable to the Company and to cash, and to receive cash in exchange for such checks, at any David's Check Cashing location.

_____ ----- Name of Individual	_____ ----- Title (Capacity)
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2- That David's Financial Corp is authorizes to payout the proceeds of checks endorsed by any such Signatory in cash or other proceeds without limitation to amount, without inquiry as to circumstances of issue, negotiation or endorsement thereof, and without further inquiry or regard to authority of the person endorsing such checks

3- That David's Financial Corp shall not be in any manner whatsoever, responsible for or required to see to the application of any of the funds disbursed to the Signatories from the cashing of checks hereunder, and that all such transactions shall be conclusively presumed to be legally binding upon the Company.

4- That, in order to induce David's Financial Corp to act pursuant to the foregoing paragraphs, the Company hereby agrees as follows

- a- This resolution shall continue in force until revoked or modified by written notice actually received by David's Financial Corp., setting forth a certified resolution to that effect stated to have been duly authorized and adopted by the appropriate authority of the Company, and signed by one purporting to be acting in the appropriate capacity of the Company; provided, however, that such notice shall not be effective as to any exercise of power prior to the receipt thereof, or as to any checks cashed on or prior to the date of such notice, and David's Financial Corp is authorized to rely on the last communication received by it, so authenticated, as to any resolution of the Company or as to the person or persons who may be Signatories of the Company, or as to their respective specimen signatures and/or to any other Company matters, and David's Financial Corp. shall be held harmless in such reliance, even though such resolution may have been changed or rescinded.

b- That David's Financial Corp need not recognize a claim of authority which conflicts with a claim of authority of which David's Financial Corp has had prior notice, unless the person asserting such subsequent claim shall produce an appropriate restraining order, injunction or other appropriate process against David's Financial Corp from a court of competent jurisdiction requiring David's Financial Corp to so act.

c- The Company shall utilize the check cashing services offered by David's Check Cashing only for the legal business purpose(s) disclosed in this Application for a Commercial Check Cashing Account, and shall not utilize such services to avoid reporting income to federal, state or municipal agencies, or to engage in any money laundering scheme, or to avoid Bank Secrecy Act or U.S.A. Patriot Act (as those Acts are defined in federal law) reporting requirements.

I further certify that the above resolution have not been altered, amended, or rescinded and are now in full force and effect.

I do hereby certify that the names and that the genuine signatures of the present Signatories of the Company are as follows:

Name (Print)	Specimen Signature (sign)
_____	_____
_____	_____
_____	_____

This resolution is effective until ordered otherwise pursuant to further resolution of the Board of Directors of _____.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of
said of _____ this ____ day of _____, 20____.
(Name of Company)

(Corporate Seal) _____
Signature
Title: _____

Company Federal Tax payer EIN: _____

Affix Corporate Seal

AFFIDAVIT OF SOLE OWNERSHIP

State of _____ SS;

County of _____

_____ being duly sworn deposes and says: I am engaged in business under the assumed name and style of _____ at _____.

In the City of _____ State of _____, I am sole Owner of the business so conducted and no other person, firm or corporation has any interest therein.

All property in the name of _____ belongs to me and is my sole property.

SWORN BEFORE ME at the City Of _____, in the _____ of _____, this _____ day of _____.

Signature

A Commissioner for Oaths in and For _____