



MEMBERSHIP APPLICATION

APPLICANT PERSONAL INFORMATION

Name:		
Date of Birth:	SSN:	Phone:
Current Address:		
City:	State:	Zip Code:

APPLICANT / BUSINESS INFORMATION

Business Name:		Business Tax ID:
Business Address:		How long?
State:	City:	Zip Code:
Phone:	E-Mail:	Fax:
Website:		
Position:	Your company purchases debt on a (please circle) basis: Monthly Quarterly Yearly	
Are you an Attorney: Yes No	States licensed in:	
Does the majority of your practice focus on Commercial Litigation: Yes No		
Is this firm a Certified Commercial Collection Agency: Yes No		
Number of employees in your firm: <input type="checkbox"/> 1-5 <input type="checkbox"/> 6-19 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-60 <input type="checkbox"/> 60+		
Total dollar amount of debt purchased last year: \$		
Debt portfolios you are seeking to purchase:		
Dollar amount of your current available cash for purchase of debt portfolios: (please select the corresponding level below)		
BRONZE: 5K to 50K SILVER: 50K to 250K GOLD: 250K to 500K PLATINUM: 500K to unlimited		

BANK REFERENCE

Bank Name:	Bank Contact:
Bank Address:	City:
State:	Zip Code:
Phone:	Fax:
Account Number:	Average Balance: \$
Bank Contact E-Mail:	

TRADE REFERENCE 1

Reference Business Name:	Contact Person / Position:
Business Address:	City:
State:	Zip Code:
Phone:	Fax:
Years in Business:	E-Mail:

TRADE REFERENCE 2

Reference Business Name:	Contact Person / Position:
Business Address:	City:
State:	Zip Code:
Phone:	Fax:
Years in Business:	E-Mail:

PERSONAL REFERENCE

Name of a relative not residing with you:	
Address:	City:
State:	Zip Code:
E-Mail:	Phone:

PRIVACY POLICY

DEBTWEBEX, LLC WILL USE THE INFORMATION YOU PROVIDE ONLY FOR THE PURPOSE OF DETERMINING YOUR ELIGIBILITY TO BE A DEBTWEBEX CUSTOMER. WE WILL NOT RELEASE THE INFORMATION TO THIRD PARTIES EXCEPT: (1) AS NECESSARY FOR US TO PROCESS YOUR APPLICATION OR (2) AS REQUIRED BY LAW.

I authorize Debtwebex, LLC to verify the information on this form.

Print Name:	Signature of Applicant:	Date:
Print Name:	Signature of Applicant:	Date:

DEBTWEBEX, LLC
550 WEST OLD COUNTRY ROAD, SUITE 110, HICKSVILLE, NY, 11801