



COMMERCIAL CHECK CASHING APPLICATION

Thank you for considering Thrifty Check Cashing for your commercial check cashing needs. Before we can cash any commercial checks for your company, we must first get some information required by the New York State Department of Financial Services (NYSDf). The NYSDf requires that we maintain certain records on file; however, these files are solely for their inspection and will not be shared with any third party.

Please complete all information on this application. Once it is complete and the information has been verified, your account will be set up for cashing your company's checks. Please note that some of the forms will need to be notarized; if you need assistance with notarization, we will be happy to help as we have a Licensed Notary Public on staff.

All checks will be verified with maker and maker's bank at the time of presentation. Thrifty Check Cashing reserves the right to refuse to cash any and all checks.

Again, thank you for choosing Thrifty. We look forward to servicing your personal and business check cashing needs.

THRIFTY CHECK CASHING



www.thriftycheckcashing.com

Please provide the following information for your company

Business Name: _____

Business Address: _____

Business Phone: _____ **Fax:** _____

Type of business: _____

Tax ID #/EIN #: _____

Primary Contact: _____

Email Address: _____

How did you hear about our service? Internet, Referral, Advertisement, Other _____ (circle one please)

Please provide the following documentation with your application. Be sure to have documents notarized where applicable. Incomplete or non-notarized applications cannot be processed. All information is required by the NYS Department of Financial Services.

- 1. Certificate of Incorporation (If Corporation)**
- 2. Certificate of Formation (If LLP or LLC)**
- 3. Certificate of Fictitious Name (If Partnership)**
- 4. Affidavit of Sole Ownership (If Sole Proprietor)**
- 5. Corporate Resolution or Affidavit Authorizing Cashing of Checks**
- 6. Copy of Valid License for each authorized signer**
- 7. Copy of Tax ID Number**
- 8. Copy of DBA Certificate**

Thrifty Employee: _____ Date: _____

Entered into system by: _____ Date: _____

**AFFIDAVIT AUTHORIZING
CASHING OF CHECKS PAYABLE TO THE COMPANY
SOLE PROPRIETOR**

I, _____, _____, of _____,
Name Title Company

a sole proprietor organized under the laws of the State of New York, hereby certify that I agree to the following statement:

The individual(s) listed below is/are hereby authorized to present on behalf of the Company checks, drafts, and money orders payable to said Company for purposes of cashing at Thrifty Check Cashing, effective until otherwise ordered pursuant to a repealing affidavit.

	Presenter #1	Presenter #2	Presenter #3
Name:			
Address:			
Telephone:			
Email:			
Date of Birth:			
SSN:			
Occupation:			

And I do further certify that the above resolution has not been in any way altered, amended, or repealed and is now in full force and effect.

In witness whereof, I have hereunto set my hand and affixed the official seal of said of
 _____ day of _____, 20_____.

Signature/Title

Subscribed and sworn before me this _____ day of _____, 20_____.

(Notary Public)

AFFIDAVIT OF SOLE OWNERSHIP

STATE OF NEW YORK)
) SS
COUNTY OF)

_____, of full age, being duly sworn according to law, deposes and says:

I am engaged in business under the assumed name and style of

(Name and type of business)

I reside at _____.
(Home address)

The principal location of my business is _____.
(Business address)

I am the sole owner of the business and no other person, firm or corporation has any interest therein.

All property in the name of _____ belongs to me and
(Name of business)
is my sole property.

Signature

Subscribed and sworn before me this _____ day of _____, 20_____.

(Notary Public)