

BD Capital

Rehab Funding Information

Please provide the following information to receive draw funds throughout the duration of the project with BD Capital, LLC. ***Please confirm the correct routing number for either ACH OR WIRE (per the box selected). If an incorrect routing number is provided, funds will be delayed.***

Borrower Name: _____

Project Property Name: _____

PLEASE CHECK ONE OF THE FOLLOWING:

ACH (Free. 2-3 days from release)

WIRE (\$10.00 Fee)

Bank Name: _____

Bank Address: _____

Bank Routing Number: _____

Account Owner Name: _____

Account Owner Address: _____

Account Number: _____

Account Type: Checking OR Savings

Personal Account OR Business Account

X

Borrower

X

Co-Borrower