	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name	dwc roofing company				Legal Name			dwc restoration inc				_	
Type of Business	ss <u>roofing constru</u>		constructi	onstruction		Tax II	_Tax ID		26-3601026			Cor	ъ
Full Business Addre	SS	1052 GR	EENWOOD	SPRINGS	BLVD								
Full Billing Address													
Phone at Location	(317) 882-3500				Best Phone				Fax	(317)	882-3700		
Business Email		cole33@hotmail.com		om	Website							_	
Years In Business		12		Average ⁻	Ticket			Gross Ar	nual Sale	s <u>6</u>	,000,000.	00	
Do you currently ha	ave cash	advance?	,	Yes	With w	/ho? wise	, nano flex			Balan	ice		_
Current Credit Card	d Process	sor					Average F	Processin	g Volume				_
Last Month Vol.			#of Ticke	ets		2nd	d Month Vol.			#of Ti	ckets		
3rd Month Vol.			#of Ticke	ets _		4th	n Month Vol.			#of Ti	ckets		_
													_
Owner #1 Name	Douglas	Cole				Title	president						
Date of Birth	170319	74				SSN	556-55-643	36					
Full Home Address	10208 E	Edgewood	Ave										
Home Phone	(317) 45	50-5877	Cell Ph	ione	(317)	450-5877	Email		ole33@hot	tmail.cor	m		
Own/Rent	\$ <u>0 Ow</u>	/ n	_ Years	There	8	Driver	s Lience # <u>na</u>		S	tate	IN		
Owner #2 Name						Title							
Date of Birth					_	SSN							
Full Home Address					_	3311							_
Home Phone			Cell Ph	ione			Email						—
Own/Rent	\$		—— Years	There		Driver	 rs Lience #	_	S	tate			_
													=
Business Home Bas	ed?	No	_Location:	Lease/Ov	vn <u>Le</u>	eased	Lease Term	n		_Month	ly Rent		_
Landlord / Mortgage	e Co.	landlord					Contac	ct	na				_
Contact Phone				C	Cell			!	Email				_
Bank Name/Branch	chase			Contac	ct			Phor	ne				
Trade Reference#1				Contac				– Phor	ne				_
Trade Reference#2				Contac				– Phor	ne				_
Trade Reference#3				Contac	ct			– Phor	ne				_
I hereby represent that all	the above	information is	true and und	erstand that	t making fa	alse stateme	nts might be consi	idered fraud	. By providir	ng the abo	ove informat	ion, the applican	 it(s)

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/our financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/We authorize Money Works Direct, Inc. to receive pertinet information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/we authorize you to update my/our credit profile from time to time in the future, as you deem appropriate. By signing below, each of the aboe listed business and business ownet/officer (individually and collectiverly, "you") authorize Money Works Direct and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transcation, including without limitation the application therefor (collectively, "Transcation") to obtain consumer or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize Money Works Direct to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Douglas Cole	Date	02/20/2020