

DDA Nama		Daliable	Hausa Sa	rvicos		agal Nama	Doliable He	nuco Corvicos	
DBA Name		-	House Se			egal Name		ouse Services	Cala Duan
Type of Business			nproveme			ax ID	81-410824	<u> </u>	Sole Prop
Full Business Addre	SS	443 Snell	St Fall Ri	ver, Ma 027	21				
Full Billing Address		(500) 05	7 4600			2 1 21 /27	4) 252 6660		
Phone at Location		(508) 837-4698			Best Phone (774)			<del></del>	
Business Email	Reliablehouse			services@gmail.com		Website		reliablehouseservices.com	
Years In Business		1		Average Tic			Gross Annu	-	25.00
Do you currently ha	ave cash	advance?		No V	Vith who? _			Balance _	
Current Credit Card Processor						Average Processing Volume			
Last Month Vol.			#of Ticke	ets		2nd Month Vol		#of Tickets	
3rd Month Vol.			#of Ticke	ets		4th Month Vol.		#of Tickets	<u> </u>
Owner #1 Name	Timothy	Dagen			Title	Owner			
Date of Birth	04291968				SSN 291-78-4257				
Full Home Address	443 Snell St Fall River, Ma 02721								
Home Phone	(508) 837	7-4698	Cell Ph	ione	(774) 353-6	6660 Email	Relia	ablehouseservices@g	gmail.com
Own/Rent	\$ <u>0 Owr</u>	า	Years	There 5	D	rivers Lience #	S30741675	State	1A
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address									
Home Phone			Cell Ph	ione .		Email			
Own/Rent	\$		Years	There	D	rivers Lience #		State	
Business Home Bas	ed?	Yes	Location:	Lease/Own	Leased	Lease Te	erm <u>3</u>	Monthly Re	ent 250.00
Landlord / Mortgage	e Co. R	losemary	Cabral			Conf	tact	NA	
Contact Phone				Cel	l <u> </u>		Em	ail	
Bank Name/Branch	Citizens	s Bank		Contact			Phone	(508) 673-107	6
Trade Reference#1	ABC Su	pply		Contact	Jeff		 Phone	(508) 676-674	6
Trade Reference#2	The Ho	The Home Depot Contac		Contact	Steven Schlageter		Phone	(508) 823-096	0
Trade Reference#3	4C's Plu	umbing		Contact	PaulCha	varria	Phone	(774) 240-350	8

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	Timothy Dagen	Date	09/27/2017