

DBA Name	N/A		Legal Name	Gulftech Fire Protection Inc	
Type of Business	Fire Suppression		Tax ID	46-0817329	Corp
Full Business Address	3120 N DAVIS HWY				
Full Billing Address					
Phone at Location	(850) 466-5501		Best Phone	(850) 466-5501	Fax (850) 492-7899
Business Email	Helen@gulftechfire.com		Website	getgulftech.com	
Years In Business	6.5	Average Ticket		Gross Annual Sales	2,000,000.00
Do you currently have cash advance?	Yes	With who?	EBF Capital		Balance 59,419.00
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

<b>Owner #1 Name</b>	John R Fields		Title	Owner	
Date of Birth	09221958		SSN	267-57-5608	
Full Home Address	2427 Sonora Calzada				
Home Phone	(850) 207-8362	Cell Phone	(850) 207-8362	Email	John@gulftechfire.com
Own/Rent	\$ 0 Own	Years There	24 years	Drivers Lience #	F432-476-58-342-0 State FL
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Chaple Street		Contact	Richard Fontaine	
Contact Phone	(850) 505-7900	Cell		Email	

Bank Name/Branch	The First	Contact	Trudy Luescher	Phone	(850) 475-9300
Trade Reference#1	Gulf Coast Marine	Contact	Hugh Arnell	Phone	(251) 452-8066
Trade Reference#2	Hilti	Contact		Phone	(800) 950-6196
Trade Reference#3	HD Supply	Contact	Ann Dirkes	Phone	(407) 822-2203

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

John Fields

Date

04/30/2019