

DBA Name	<u>Mi</u>	ami Crane Inc		Le	egal Name	Miami Cra	ne Sales Inc				
Type of Business		Crane service and repairs			Tax ID		46-3380050		Corp		
Full Business Address 1508 bay rd #1189 Miami Beach, FL 33139											
Full Billing Address											
Phone at Location	(305) 766-4203			Best Phone (305) 766-4203 Fax							
Business Email	miamicraneinc@gmail.com			Website		www.mian	www.miamicraneinc.com				
Years In Business	4		Average Tic	ket		Gross Annu	ıal Sales	250,000.00			
Do you currently ha	ave cash adva	ance?	No V	Vith who? _			Bal	ance			
Current Credit Card	urrent Credit Card Processor				Average Processing Volume						
Last Month Vol.		#of Tick	cets		2nd Month Vo	ol	#of	Tickets			
3rd Month Vol.		#of Tick	ets		4th Month Vo	l	#of	Tickets			
Owner #1 Name	Mark Malcolm	1		Title	-						
Date of Birth	12-02-1961 SSN 364-80-8670										
Full Home Address	1508 bay Rd #1189 Miami Beach, FL 33139										
Home Phone	(305) 766-420	03 Cell P	hone	(305) 766-4	1203 Email	mia ———	micraneinc@	gmail.com			
Own/Rent	\$ 0 Rent	Years	There 1	D	rivers Lience #	M42454561442	0 State	Florida	_		
O #2 No				T:41.							
Owner #2 Name				Title							
Date of Birth				SSN							
Full Home Address Home Phone		Cell F	hone		Email						
Own/Rent	\$		There		rivers Lience #		State				
OWII/Rent	Ъ				invers Lience #				_		
Business Home Bas	ed? Yes	Location	: Lease/Own	Leased	Lease T	erm	Mon	thly Rent			
Landlord / Mortgage	e Co				Сог	ntact					
Contact Phone			_ Cel	l		Em	ail _				
Bank Name/Branch	Bank Of Am	nerica	Contact	·		Phone	(800) 4	32-1000			
Trade Reference#1	Connelly Cr	rane	- Contact	Bud Her	man	Phone	(313) 5	31-2700			
Trade Reference#2	Scheider Enterprise Inc Contact		Tom Greenman		Phone	(517) 4	03-1303				
Trade Reference#3	Hunter Mer	chant Crane	- Contact	Barry As	ssad	Phone	(954) 2	75-7345			
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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	Mark Malcolm	Date	06/08/2017