

DBA Name		Romeos pizza si	nd more	Le	egal Name	Romeos pizz	a and more		
Type of Business		Pizza restaurant			ax ID	47-5602967			LLC
Full Business Addre	ess	843 rte 33						_	
Full Billing Address									
Phone at Location		(732) 845-5454			Best Phone (732)	598-5313	Fax	(732)	845-1616
Business Email					Website	Romeospizza	andmore.com	า	
Years In Business	s In Business 9		Average Tick			Gross Annual Sales 400,000.00			0
Do you currently h	ave cash	advance?	No V	With who? _			Balanc	e	
Current Credit Card Processo		or			Average	Processing Vo	lume _		
Last Month Vol.		#of Tic	kets		2nd Month Vol.		#of Tick	cets	
3rd Month Vol.		#of Tic	kets		4th Month Vol.		_ #of Tick	ets	
Owner #1 Name	Pasqualir	na Pivera		Title	Owner				
Date of Birth	09/08/19			SSN					
Full Home Address		Burdge Dr howell nj 07731							
Home Phone	(732) 845	•	Phone	(732) 598-5	313 Email	leeanr	nromeo@gmail.	com	
Own/Rent	\$ 0 Owr						ersey		
					_				
Owner #2 Name				Title					
Date of Birth				SSN					
Full Home Address									
Home Phone	-	Cell	Phone		Email				
Own/Rent	\$	Yea	rs There	D	rivers Lience #		State		
Business Home Bas	sed?	No Locatio	n: Lease/Own	Leased	Lease Terr	n <u>9</u> years	Monthly	Rent	3,412.00
Landlord / Mortgag	e Co. <u> </u>	ousins Realty			Conta	ict	Howsrd topa	al	
Contact Phone	<u>(</u>	732) 431-3339	Cel	_		Emai	l		
Bank Name/Branch	Investo	rs bank	Contact			Phone	(732) 780-0	0600	
Trade Reference#1			 Contact			— Phone			
Trade Reference#2			— Contact			— Phone			
Trade Reference#3			Contact			Phone			
I hereby represent that all	the above in	formation is true and u	understand that m	aking falso sta	tomonts might be con-	sidered fraud. By n	roviding the above	a informat	ion the applicant(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	Pasqualina Rivera	Date	01/23/2020