

DBA Name	Endles	s Summer	Legal Name		Endless Summer Tanning		
Type of Business Tanning Salon		g Salon	Tax	ID	46-0810137		Sole Prop
Full Business Addre	ss <u>91 Carv</u>	er Rd Plymouth MA 0	2360				
Full Billing Address							
Phone at Location (508) 746-0050		46-0050	Be	st Phone <u>(508)</u>	254-2296	Fax	
Business Email	endles	ssummertans@verizo	n.net	Website	Plymouthendlesssummer.com		
Years In Business	14	Average T	icket		Gross Annual Sales 250,000.00		
Do you currently ha	ave cash advance	? Yes	With who? On	Deck		Balance 1250	0
Current Credit Card Processor				Average	Processing Volum	e	
Last Month Vol.		#of Tickets	2	nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tickets	4	th Month Vol.		#of Tickets	
Owner #1 Name	Julie Foster		Title	Owner			
Date of Birth	09-18-69		— SSN	505-08-07	 17		
Full Home Address	23 Cooke rd		_				
Home Phone	(508) 254-2296	Cell Phone	(508) 254-229	96 Email	jj.foster@\	verizon.net	
Own/Rent	\$ 0 Own	—— Years There	L2 Driv	ers Lience # S9	0617251	State Mass	achusetts
			_				
Owner #2 Name			Title				
Date of Birth			SSN				
Full Home Address							
Home Phone		Cell Phone		Email			
Own/Rent	\$	Years There _	Driv	rers Lience #		State	
Business Home Bas	sed? No	_Location: Lease/Ow	n <u>Leased</u>	Lease Tern	n	Monthly Rent	
Landlord / Mortgage	e Co. Scanton F	lolding Co		Conta	ct <u>M</u> a	ark Jones	
Contact Phone		C	ell		_ Email		
Bank Name/Branch	Rockland Trust	Company Contac	t		Phone		
Trade Reference#1		Contac	t		Phone		
Trade Reference#2		Contac	t		Phone		
Trade Reference#3		Contac	t		Phone		
I hereby represent that all	the above information i	s true and understand that	making false stater	ments might be cons	idered fraud. By provid	ling the above informa	ation, 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	Julie Foster	Date	04/21/2017