

DBA Name		Waterways Cruises and Event		ts Legal Name		Seattle La			
Type of Business		Dining cruises		7	Tax ID		463824029		LLC
Full Business Addre	!SS	2441 N Northla	ke Way						
Full Billing Address									
Phone at Location		(206) 223-206		Best Phone (206)		999-2500	Fax		
Business Email	Business Email		hilton@waterwayscruises.cor		m Website		www.waterwayscruises.com		
Years In Business		24	Average Ti	cket _			Gross Anni	ual Sales <u>3,300,00</u>	0.00
Do you currently ha	ave cash	advance?	Yes	With who?	Gravity Pay	ements	5	Balance <u>50,0</u>	000
Current Credit Card Processor Average Processing Volume									
Last Month Vol.	-	#of T	ickets		2nd Montl	h Vol.		#of Tickets	
3rd Month Vol.		#of T	ickets		4th Month	n Vol.		#of Tickets	
Owner #1 Name	Shirley Tu			Title –		undwer 8			
Date of Birth	08-12-19			122 -	N 519	9-50-797	72		
Full Home Address		helby Street							
Home Phone	(206) 999	9-2500 Ce	ell Phone	(206) 999-	2500 Em	ail	hilt ——	onmail@aol.com	
Own/Rent	\$ <u>0 Ren</u>	t Ye	ears There $\frac{2}{2}$.5I	Drivers Lience	e# <u>TL</u>	JRNBSA551nl	State Was	hington
Owner #2 Name				Title –	e				
Date of Birth				SSN 	N				
Full Home Address									
Home Phone		Ce	ell Phone		Em	ail			
Own/Rent	\$ Own	Ye	ears There		Drivers Lience	e #		State	
Business Home Base	ed?	No Locatio	n: Lease/Own	Leased	Lease ⁻	Term		Monthly Rent	
Landlord / Mortgage	Co. <u>S</u>	Seattle marina Ir	nc			Conta	ct	Sam LeClerq	
Contact Phone	(2	06) 633-7892	Cell				Email	samleclercqma	arine@gmail.com
Bank Name/Branch	Umpqua	Bank	Contact	Mike Coll	um		Phone	(425) 256-6579	
Trade Reference#1 Morrison's		 Contact	Dave Morrison		Phone	(206) 284-6600			
Trade Reference#2			Contact				Phone		
Trade Reference#3			Contact				Phone		
I hereby represent that all	the ahove in	oformation is true and	d understand that n	making false st	atements migh	t he cons	idered fraud R	v providing the above inform	nation 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Hilton Smith	Date	10/06/2017