

DBA Name	Expert Restoration		Legal Name	Expert Restoration, Inc.	
Type of Business	Disaster Clean Up		Tax ID	47-3791759	Corp
Full Business Address	770 E Main St. #317				
Full Billing Address					
Phone at Location	(801) 754-4722		Best Phone	(801) 310-0005	Fax
Business Email	paul@expertrestoration911.com		Website	expertrestorationutah.com	
Years In Business	2	Average Ticket		Gross Annual Sales	3,500,000.00
Do you currently have cash advance?	No	With who?		Balance	
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

Owner #1 Name	Paul Goodwin		Title	CFO	
Date of Birth	07/26/1974		SSN	529-77-8895	
Full Home Address	8488 Stonebridge Ln, Eagle Mountain, UT 84005				
Home Phone	(801) 310-0005	Cell Phone	(801) 310-0005	Email	paul@expertrestoration911.com
Own/Rent	\$ 0 Own	Years There	4	Drivers Lience #	151338368 State UT
Owner #2 Name	Tim Graham		Title	CEO	
Date of Birth			SSN	529-91-5165	
Full Home Address	1559 S. 530 E. Lehi, UT 84043				
Home Phone		Cell Phone	(801) 310-0005	Email	tim@expertrestoration911.com
Own/Rent	\$ Rent	Years There	2	Drivers Lience #	150818878 State UT

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	4 years	Monthly Rent	5,000.00
Landlord / Mortgage Co.	Sovereign Properties			Contact	Trevor Sharp		
Contact Phone	(801) 787-4603		Cell		Email	sovproperties@gmail.com	

Bank Name/Branch	Mountain America CU	Contact	Customer Service	Phone	(800) 748-4302
Trade Reference#1	Iron Moose Ventures	Contact	Kyle Moosmann	Phone	(801) 494-3575
Trade Reference#2	BioSecurity Solutions	Contact	Paul Reay	Phone	(801) 787-7525
Trade Reference#3	Zambrano Construction	Contact	Juan Zambrano	Phone	(801) 691-6930

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

Paul Goodwin

Date

08/16/2019