

Type of Business	DBA Name		American Building Components Corp.			Corp. L	Legal Name		American Building Components Corp.				
Full Billing Address Phone at Location Commer #1 Name Commer #2 Name Commer #3 Name Commer #3 Name Commer #4 Name Commer *4 Name	Type of Business		construction sub contractor			Ta	Tax ID					Corp	
Phone at Location	Full Business Addre	SS	235 Mair	n Ave.									
Business Email Business Bayr	Full Billing Address												
Years In Business 8 yr Average Ticket Gross Annual Sales 600,000.00 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 Robert O'Brien Title President Date of Birth 05161951 SSN 041-46-9636 Full Home Address 16 Scott St. Home Phone (203) 354-6576 Cell Phone (203) 354-6576 Email abccorp10@yahoo.com Own/Rent \$ 0 Own Years There 32 Drivers Lience # 052224863 State ct Owner #2 Name Title SSN Title SSN State ct Owner #2 Name Cell Phone Email SSN State ct Own/Rent \$ 10 Phone Email State Ct Business Home Based? No	Phone at Location		(203) 3	54-6576			Best Ph	none <u>(203)</u>	354-6576	Fax	(203)	354-6577	
Do you currently have cash advance? No With who? Balance	Business Email		abccorp	10@yahoo.	.com		Website						
Current Credit Card Processor	Years In Business		8 yr	A\	erage Tick	et _		<u>.</u>	Gross Annu	al Sales	600,000.0	0	
Business Home Based? No Location: Lease/Own Leased Lease Term State Stat	Do you currently ha	ave cash	advance?	No	o Wi	th who?				Bal	ance		
3rd Month Vol.	Current Credit Card Processor Average Processing Volume												
Owner #1 Name Robert O'Brien Title President Date of Birth 05161951 55N 041-46-9636 Full Home Address 16 Scott St. 16 Scott St. 16 Scott St. Home Phone (203) 354-6576 Cell Phone (203) 354-6576 Email abccorp10@yahoo.com Own/Rent \$ 0 Own Years There 32 Drivers Lience # 052224863 State ct Owner #2 Name Title SSN Full Home Address Home Phone Cell Phone Email State Own/Rent \$ Years There Drivers Lience # State State Business Home Based? No Location: Lease/Own Leased Lease Term 3yr Monthly Rent 1,650.00 Landlord / Mortgage Co. Fairfield County Investments Co. Contact Contact Phone Email Bank Name/Branch Webster bank 402 Connecti Contact Phone Phone (203) 299-5680 Trade Reference#1 Englert Inc. Contact <td rowspa<="" td=""><td>Last Month Vol.</td><td></td><td></td><td>#of Tickets</td><td><u> </u></td><td></td><td>2nd N</td><td>onth Vol.</td><td></td><td> #of</td><td>Tickets</td><td></td></td>	<td>Last Month Vol.</td> <td></td> <td></td> <td>#of Tickets</td> <td><u> </u></td> <td></td> <td>2nd N</td> <td>onth Vol.</td> <td></td> <td> #of</td> <td>Tickets</td> <td></td>	Last Month Vol.			#of Tickets	<u> </u>		2nd N	onth Vol.		#of	Tickets	
Date of Birth Down/Rent Substituting Date of Birth Date	3rd Month Vol.			#of Tickets	<u> </u>		4th M	lonth Vol.		#of	Tickets		
Full Home Address	Owner #1 Name	Robert O	'Brien			Title	e	President					
Home Phone	Date of Birth	0516195	1			SSN	V	041-46-96	36				
Own/Rent \$ 0 Own Years There 32 Drivers Lience # 052224863 State ct Owner #2 Name Title Date of Birth SSN SSN Full Home Address Home Phone Email Own/Rent Years There Drivers Lience # State Business Home Based? No Location: Lease/Own Leased Lease Term 3yr Monthly Rent 1,650.00 Landlord / Mortgage Co. Fairfield County Investments Co. Contact Contact Alfred Lenoci Jr. Contact Phone (203) 334-9222 Cell Email Bank Name/Branch webster bank 402 Connecti Contact Phone (203) 299-5680 Trade Reference#1 Englert Inc. Contact Phone (800) 364-5378 Trade Reference#2 Contact Phone Phone	Full Home Address	16 Scott	St.										
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Trade Reference#1 Englert Inc. Contact Patrcia Britton Phone (203) 299-5680 Trade Reference#2 Contact Phone (800) 364-5378 Phone Phone (203) 299-5680	Contact Phone	<u>(</u> :	203) 334-	9222	Cell	_			Em	ail _			
Trade Reference#2 Contact Phone	Bank Name/Branch			2	Contact	Patrcia	a Britto	n	Phone	(203) 2	299-5680		
	Trade Reference#1	Englert	lnc.		Contact				Phone	(800)	364-5378		
Trade Reference#3 Contact Phone	Trade Reference#2				Contact				Phone				
	Trade Reference#3				Contact				 Phone				

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	Robert O'Brien	Date	10/21/2016
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