

DBA Name	Severn River Group		Legal Name	Severn river group llc	
Type of Business	Disaster response emergency response		Tax ID	472250152	Corp
Full Business Address	625 celeste street				
Full Billing Address					
Phone at Location	(504) 232-6506	Best Phone	(504) 232-6506	Fax	
Business Email	bob@sriverrllc.com		Website		
Years In Business	15	Average Ticket		Gross Annual Sales	2,000,000.00
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 Armbruster		Title	Principal	
Date of Birth	06291974		SSN	218-08-1193	
Full Home Address	4 versailles blvd				
Home Phone	(504) 232-6506	Cell Phone	(504) 232-6506	Email	bob@sriverrllc.com
Own/Rent	\$ 0 Own	Years There	15	Drivers Lience #	008619679
				State	La
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	
				State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	625 Celeste LLC			Contact	Robert armbruster
Contact Phone	(504) 232-6506	Cell	(504) 232-6506	Email	rarmbruster@me.com

Bank Name/Branch	jp morgan chase	Contact	Rodney sandlin	Phone	(198) 596-9185
Trade Reference#1	Sherwin williams	Contact	Darren	Phone	(985) 969-1853
Trade Reference#2	Sunbelt rentals	Contact	Any manager	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 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	Robert Armbruster	Date	05/10/2019
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