

DBA Name		Flame	Industries	nc .	1 6	egal Name	Flame Indus	tries Inc	
Type of Business			istribution			ax ID	102-684209		Corp
Full Business Addre				je Blvd #464	-	3X 1D	102-004203		Согр
	:55	211 3. 3	state Collec	je bivu #404					
Full Billing Address		(0.40)				2 t Db (0.40	\ (02.1262	F	
Phone at Location		(949) 683-1263 jimcast128@gmail.com			Best Phone (949) 6) 083-1203	Fax	
Business Email		-				Website			
Years In Business		5		Average Tick			Gross Annual	Sales <u>285,000.00</u>	
Do you currently h	ave cas	h advance	?	No W	ith who? _			Balance	
Current Credit Card Processor						Average	Processing Vo	lume	
Last Month Vol.			#of Tick	ets		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tick	ets		4th Month Vol.		#of Tickets	
Owner #1 Name		Casterline			Title				
Date of Birth	03/07/3				SSN	565-50-69	027		
Full Home Address		. Sycamore	-		(0.10) 000 0				
Home Phone		883-1263	Cell Ph	_	(949) 683-1		jimcas	st128@gmail.com	
Own/Rent	\$ <u>0 R</u>	ent	Years	There 5	D	rivers Lience # F	0731647	State CA	
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address									
Home Phone			Cell Ph	none		Email			
Own/Rent	\$		Years	There	D	rivers Lience #		State	
Business Home Bas	sed?	No	_Location:	Lease/Own	Leased	Lease Terr	m	Monthly Rent	
Landlord / Mortgage	e Co.	Monroe P	roperties			Conta	act	John	
Contact Phone		(714) 998	3-1300	Cell			Emai	<u> </u>	
Bank Name/Branch	Bank	of America	a	Contact	Brittany		Phone	(714) 778-7355	
Trade Reference#1				Contact			— Phone		
Trade Reference#2				Contact			— Phone		
Trade Reference#3				Contact			— Phone		
I hereby represent that all	the above	information	is true and und	lerstand that ma	king false stat	tements might be con	sidered fraud. Bv p	roviding the above information	on, 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	James Casterline	Date	03/19/2019