

DBA Name	TAF FREIGHT inc		Legal Name	TAF FREIGHT INC	
Type of Business	Transportation		Tax ID	N/A Corp	
Full Business Address	3445 kentucky AV indianapolis, IN 46221				
Full Billing Address					
Phone at Location	(317) 772-2699		Best Phone	(317) 772-2699 Fax	
Business Email	sadvi2902@gmail.com		Website		
Years In Business	6	Average Ticket		Gross Annual Sales	380,000.00
Do you currently have cash advance?	Yes	With who?	Direct capital		Balance 16000.00
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	Abderr Sadvi		Title	Owner	
Date of Birth	10/11/2967		SSN	305-23-1758	
Full Home Address	6713 hollow run dr 522 indianapolis, IN 46214				
Home Phone	(317) 772-2699	Cell Phone	(317) 772-2699	Email	sadviabd@yahoo.com
Own/Rent	\$ 0 Own	Years There	7	Drivers Lience #	State IN
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.				Contact	
Contact Phone		Cell		Email	

Bank Name/Branch	Chase	Contact		Phone	
Trade Reference#1	Mauti transport	Contact	NAGi kaber	Phone	(317) 666-5848
Trade Reference#2	Rim carrier	Contact	Ould sidi	Phone	(317) 709-6897
Trade Reference#3	Elmo trucking	Contact	Moctar	Phone	(317) 719-3613

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	Abderr Sadvi	Date	08/13/2019
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