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DBA Name		Scott's Lawn Care Service		Legal Name		Scotts Lawn Care Service, LLC		
Type of Business		Landscaping and lawn care		T	ax ID	451794294		LLC
Full Business Addre	:SS	6721 Heather Ric	dge Cir					
Full Billing Address								
Phone at Location		(205) 907-9948			Best Phone	Fax		
Business Email		scottslawncareservicellc@gma		l.com_	Website	www.scottsl		
Years In Business		2005	Average Ticke	et		Gross Annual Sales 180,000.00		
Do you currently h	ave cash a	advance?	No Wi	th who? _			Balance	
Current Credit Card	d Processo	or			Average Processing Volume		lume	
Last Month Vol.		#of Tic	kets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tic	kets		4th Month Vol.		#of Tickets	
Owner #1 Name	Trevor Sc			Title				
Date of Birth	18-09-19			SSN	424-21-802	26		
Full Home Address	6721 Heather Ridge Cir Pinson, Al 35126							
Home Phone	(205) 907	7-9948 Cell	Phone —		Email	scotts	slawncareservicellc@gmail.com	
Own/Rent	\$ 0 Rent	Yea	rs There 1	D	rivers Lience # 59	978183	State Alabama	=
Owner #2 Name				Title				
Date of Birth Full Home Address				SSN				
Home Phone		Cell	Phone		Email			
Own/Rent	\$		rs There		rivers Lience #		State	
OWII/Relic							State	-
Business Home Bas	sed?	No Location	n: Lease/Own	Leased	Lease Tern	n	Monthly Rent	
Landlord / Mortgage	e Co. <u>C</u>	onrex Rental			Conta	ct		
Contact Phone			Cell			Ema	il	
Bank Name/Branch	BB&T		Contact			Phone		
Trade Reference#1 RentOne		 Contact			 Phone	(205) 631-4693		
Trade Reference#2 SiteOne			— Contact			– Phone	(205) 980-0770	
Trade Reference#3	Ewing		Contact			Phone	(205) 655-9530	
I horoby represent that all	the above in	formation is true and u	ndorstand that make	ing falso sta	tomonts might be sens	idorod fraud. By r	providing the above information, 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.

Vorks Direct and to each of the Recipients, on its own behalf.			 		
Signature#1	Printed Name	Trevor Scott	Date -	10/17/2018	