

DBA Name	Atlanta Dealer Services		Legal Name	Atlanta Dealer Services	
Type of Business	windshield repair		Tax ID	47-1170113	Corp
Full Business Address	3900 Halisport Cv NW				
Full Billing Address					
Phone at Location	(770) 286-2811		Best Phone	(770) 286-2811	Fax
Business Email	npalomaki@atldealerservices.com		Website		
Years In Business	2.5	Average Ticket		Gross Annual Sales	125,000.00
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

<b>Owner #1 Name</b>	Nik Palomaki		Title	Owner	
Date of Birth	03191971		SSN	286-62-7189	
Full Home Address	3900 Halisport Cv NW				
Home Phone	(770) 286-2811	Cell Phone		Email	npalomaki@atldealerservices.com
Own/Rent	\$ 0 Own	Years There		Drivers Lience #	055505127
				State	GA
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	
				State	

Business Home Based?	Yes	Location: Lease/Own	Owned	Lease Term		Monthly Rent	
Landlord / Mortgage Co.				Contact			
Contact Phone		Cell		Email			

Bank Name/Branch	Chase/Acworth	Contact		Phone	(770) 421-0513
Trade Reference#1	Safelite Solutions	Contact		Phone	(614) 602-2120
Trade Reference#2	Lynx Services	Contact		Phone	(239) 479-6000
Trade Reference#3	Chase Paymentech	Contact		Phone	(866) 428-4967

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 aboe listed business and business owne/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 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 informaiton 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

Nik Palomaki

Date

11/15/2017