

DBA Name		island countertops		Leg	al Name	island countertops		
Type of Business		countertop manufacturing		 Tax	: ID	020558406		Corp
Full Business Addre	ess	5151 se na:	ssau terr					
Full Billing Address								
Phone at Location		(772) 521-8677			Best Phone (772) 521-8677		Fax	
Business Email					Website			
Years In Business		14	Average Ti	icket		Gross Annual Sales 250,000.00		
Do you currently h	ave cash	advance?	Yes	With who? sea	acoast , ondeck		Balance \$1998	6,\$8900
Current Credit Card Processor Average Processing Volume								
Last Month Vol.		#	of Tickets	2	nd Month Vol.		#of Tickets	
3rd Month Vol.		#	of Tickets		th Month Vol.		#of Tickets	
Owner #1 Name	stephen	nogav		Title	president			
Date of Birth	06-26-19			– SSN	080-56-783	2		
Full Home Address	5151 se nassau terr							
Home Phone	(772) 523	1-8677	Cell Phone	(772) 521-867	77 Email	islandcou	untertops1@live.com	
Own/Rent	\$ <u>0 Owr</u>	n	Years There	Driv	vers Lience #	State		
Owner #2 Name				_ Title				
Date of Birth				SSN				
Full Home Address								
Home Phone	-		Cell Phone		Email			
Own/Rent	\$		Years There _	Driv	vers Lience #		State	
Business Home Bas	sed?	No Lo	cation: Lease/Owi	n <u>Leased</u>	Lease Term	1	Monthly Rent	
Landlord / Mortgage	e Co				Contac	it _		
Contact Phone			Ce	ell		_ Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1	_		Contact	:		Phone		
Trade Reference#2			 Contact	:		Phone		
Trade Reference#3			Contact	: 		Phone		
I horoby represent that all	the above in	oformation is true	e and understand that r	making falso stator	monts might he consi	dered fraud. By provi	iding the above informati	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	stephen nogay	Date	11/17/2016