

DBA Name		Oscar Hernandez		Legal Name		(	G&H homebuilding LLC				
Type of Business		Framing construction		Tax ID		_			Corp		
Full Business Addre	SS	445 w 27	700 s perry	ut 84302							
Full Billing Address											
Phone at Location (435)		(435) 2	135) 237-3765		Best Phone (435)		435) 2	37-3765	Fax		
Business Email	Olhernandez1@icl		loud.com	om W							
Years In Business		3		Average Ti	cket		_	Gross Annual Sale	es <u>i</u>	1,000,000.00	
Do you currently ha	ave cash	advance?	•	Yes	With who? G	lass funds			Bala	nce <u>140k</u>	
Current Credit Card	or				Average Processing Volume						
Last Month Vol.			#of Ticke	ets		2nd Month V	ol.		#of T	ickets	
3rd Month Vol.			#of Ticke	ets		4th Month V	ol.		#of T	ickets	
Owner #1 Name	Oscar He	rnandez			Title	Sole o	wner				
Date of Birth	05/11/19				- SSN		6-5201				
Full Home Address		27 willard	ut 84340		-						
Home Phone	(435) 237	7-3765	Cell Ph	one	(435) 237-37	'65 Email		olhernande	z1@iclo	oud.com	
Own/Rent	\$ 0 Owr	<u> </u>	Years	There 4	352373765 Dr	 ivers Lience #	1640	628463 S	State	UT	
			_	_							<del>_</del>
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Ph	one		Email					
Own/Rent	\$		_ Years	There	Dr	ivers Lience #		S	State		_
Business Home Bas	ed?	No	Location:	Lease/Owr	n <u>Leased</u>	Lease	Term		_Month	nly Rent	
Landlord / Mortgage	e Co					Co	ontact				
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 hereby represent that all	the above in	formation is	tous and und	oretand that r	nalina falsa stati	ana anta maialat ha		arad fraud. By providi		ava information th	a annlicant/a)

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	Oscar Hernandez	Date	11/06/2019
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