MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809
woney works	Sales Rep: Julian

DBA Name		Hunt Pes	t Control,	Inc.	Le	egal Name	Darren Hunt	Pest Control	l, Inc.	
Type of Business	Business pest control			ax ID	27-0706039			Corp		
Full Business Addre	dress 7719 MS Hwy 9, Ackerman, MS				39735					•
Full Billing Address										
Phone at Location	(662) 387-4700					Best Phone (662	2) 285-7983	Fax		
Business Email		darren@huntpestcontrol.com				Website	huntpestcontrol.com			
Years In Business		7		Average Tic	ket		Gross Annual	Sales 3	60,000.00	
Do you currently ha	ave cash a	advance?		No V	Vith who? _			Balan	ce	
Current Credit Card	d Processo	or				Average	Processing Vol	ume		
Last Month Vol.			#of Ticke	ts		2nd Month Vol.		#of Tid	ckets	
3rd Month Vol.			#of Ticke	ts		4th Month Vol.		#of Tid	ckets	
Owner #1 Name	Darron III	ınt			Title	Drasidant				
Owner #1 Name Date of Birth	09-07-196				Title SSN		262			
Full Home Address		Hwy 9, Acke	rman MS	39735	3311					
Home Phone	(662) 285		Cell Ph		(662) 285-7		darren	@huntpestco	ntrol.com	
Own/Rent	\$ 0 Own		— Years ⁻	There 12	D	rivers Lience # 8		State	MS	
						_				_
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Ph	one		Email				
Own/Rent	\$		Years ⁻	There	D	rivers Lience # _		State		
Business Home Bas	ed?	Yes L	ocation:	Lease/Own	Owned	Lease Ter	m	Monthl	y Rent	
Landlord / Mortgage	e Co. <u>n</u> e	one				Conta	act			
Contact Phone	_			Cel	l <u> </u>		Email			
Bank Name/Branch	Regions			Contact	Ackerma	an	Phone	(662) 285	-6278	
Trade Reference#1	Pete's A	uto		Contact	Pete		— Phone	(662) 285	-6700	
Trade Reference#2	Oldham	Chemical		Contact	Bobby		— Phone	(601) 353-	-2104	
Trade Reference#3	Kevin's	Car Care		Contact	Kim		Phone	(662) 341-	-2066	
I hereby represent that all	the above in	formation is tr	rue and unde	erstand that ma	aking false sta	tements might be cor	sidered fraud. By pr	oviding the abo	ve information, th	ne 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.

	of the Recipients, on its own behalf.	ent to the release, by any	creditor or infancial institution, of any informa	ation relating to ar	ly of you, to Money
Signature#1		Printed Name	Darren Hunt	Date	02/08/2018