

DBA Name	Pizza Hut	Legal Name	Legacy Pizza D.B.A Pizza Hut	
Type of Business	Rest.	Tax ID	27-1077343	LLC
Full Business Address	530 N. Main street, Cedartown, GA 30125			
Full Billing Address				
Phone at Location	(404) 803-8506	Best Phone	(404) 803-8506	Fax
Business Email	Legacypizza@gmail.com	Website		
Years In Business	10	Average Ticket		Gross Annual Sales 3,000,000.00
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

Owner #1 Name	Kurani Kamran	Title	owner
Date of Birth	04-20-1975	SSN	605-20-0689
Full Home Address	1170 faith ct, Suwanee, GA 30024		
Home Phone	(404) 803-8506	Cell Phone	(404) 803-8506
		Email	k4048038506@gmail.com
Own/Rent	\$ 0 Own	Years There	4048038506 Drivers Lience # 049169677 State GA
Owner #2 Name		Title	
Date of Birth		SSN	
Full Home Address			
Home Phone		Cell Phone	
		Email	
Own/Rent	\$	Years There	
		Drivers Lience #	
		State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Southcrest Bank		Contact	Jackie Hart	
Contact Phone	(770) 248-1094	Cell		Email	

Bank Name/Branch	United Community Bank	Contact	Eric	Phone	(770) 877-7988
Trade Reference#1	Mclane	Contact	Jim Vaughn	Phone	(404) 675-7138
Trade Reference#2	MSparks	Contact	Kandi Lewis	Phone	(404) 587-5771
Trade Reference#3	Pepsi	Contact	Taison Andrews	Phone	(678) 972-4627

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 above listed business and business owner/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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	Kamran Kurani	Date	06/28/2017
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