

DBA Name		Joy Limo Service			Le	Legal Name		MS Limousine Services Inc			
Type of Business		Transportation			T	Tax ID		753248968			Corp
Full Business Addre	SS	8128 Ch	elaberry C	t Gaithersk	ourg MD 208	79					
Full Billing Address											
Phone at Location (301) 740-8515					Best Phone (301)			-8515	Fax		
Business Email	Saleemgouher@yahoo.co			/ahoo.com	Website		ww	www.joylimo.net			
Years In Business		15		Average T	icket		Gro	Gross Annual Sales 890,000.00			
Do you currently ha	ave cas	h advance	?	No	With who? _				Balance		
Current Credit Card Processor						Average Processing Volume					
Last Month Vol.			#of Tick	ets		2nd Month Vo	ol		#of Ticke	ets	
3rd Month Vol.			#of Tick	ets		4th Month Vo	ol		#of Ticke	ets	
Owner #1 Name	Mian Sa	aleem			Title	Preside	ent				
Date of Birth	01051948			_ SSN							
Full Home Address	8128 C	helaberry C	t Gaithersbu	urg MD 2087	_						
Home Phone		40-8515	Cell P		(240) 449-5	.089 Email		saleem	ngouher@yahoo.	.com	
Own/Rent	\$ 0 O					rivers Lience #	s45060		State	Maryla	and
	· 		_								
Owner #2 Name					Title						
Date of Birth					– SSN						
Full Home Address					_						
Home Phone			Cell P	hone		Email					
Own/Rent	\$		Years	There _	D	rivers Lience #			State		
Business Home Bas	ed?	No	_Location:	Lease/Ow	n <u>Leased</u>	Lease T	erm	5 Years	Monthly I	Rent	1,100.00
Landlord / Mortgage	e Co.	Terra Firm	na LLC			Cor	ntact		301-990-970	4	
Contact Phone				_ Ce	ell _			Email			
Bank Name/Branch				Contact	İ			Phone			
Trade Reference#1				Contact	t			Phone			
Trade Reference#2				Contact	<u></u>			Phone			
Trade Reference#3				- Contact				Phone			
I haraby raprocent that all	+ha ahawa	information i	s twice and iin	daretand that	malina falsa sta	tamanta miaht ha	concidorod	fraud By pr	aviding the above	informat	tion the annlicent(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	Mian Saleem	Date	03/06/2019
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