

DBA Name		Austin Home Ir	nprovement	L	egal Name	Jon Austin		
Type of Business		Contracting			ax ID	407354575		Sole Prop
Full Business Addre	ess	522 old highwa	y 60					·
Full Billing Address			-					
Phone at Location		(270) 945-2322			Best Phone (270	) 945-2322	Fax	
Business Email		Austinhomeimp1@yahoo.com		1	Website			
Years In Business		15	Average Tic	ket		Gross Annua	Sales 100,000.00	
Do you currently h	ave cash a	advance?	No V	Vith who? _			Balance	
Current Credit Card Processor		or			_ Average	Processing Vo	lume	
Last Month Vol.		#of T	ickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of T	ickets		4th Month Vol.		#of Tickets	
_								
Owner #1 Name	Jonathan .	Austin		Title				
Date of Birth	12/21/73	250 Novel		SSN	407-35-45	0/5		
Full Home Address	1888 Hwy 259 North (270) 935-2322 Cell Phone			(270) 045 2	222 = "		hamalan 10 anh an ann	
Home Phone			ll Phone	(270) 945-2	<del></del>	-	homeimp1@yahoo.com	
Own/Rent	\$ <u>0 Own</u>	Ye	ars There 15	D	rivers Lience # A	195002485	State KY	
Owner #2 Name				Title	ı			
Date of Birth				SSN	-			
Full Home Address								
Home Phone	-	Ce	II Phone		Email			
Own/Rent	\$	Ye	ars There	D	rivers Lience #		State	
Business Home Bas	sed?	Yes Locati	on: Lease/Own	Owned	Lease Ter	m	Monthly Rent	
Landlord / Mortgag	-				Conta	-		
Contact Phone	_		Cell			Emai		
Contact Phone								
Bank Name/Branch	Cecilian	bank	Contact	Anyone		Phone	(270) 756-2166	
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 true and	understand that ma	aking false sta	itements might be con	sidered fraud. By p	roviding the above information	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	Jonathan Austin	Date	10/17/2016
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