MoneyWorks >>	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: John

DBA Name		Great Dar	e Sewer & Drain	n Lo	egal Name	Great Dane Sewer	& Drain LLC	
Type of Business		Plumbing			ax ID	82-3220269		Corp
Full Business Addre	SS	19 Academ	y st Pleasantvill	le, NY 10570				
Full Billing Address	•							
Phone at Location (914) 215-4713		Best Phone		Fax				
Business Email		msc@gm	plumbingandhe	eating.com	Website			
Years In Business		1	Average	e Ticket		Gross Annual Sales	300,000.00	
Do you currently ha	ave cash a	advance?	No	With who? _			Balance	
Current Credit Card	d Processo	r			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	Sione Tau	fa		Title	e Owner/Op	erator		
Date of Birth	12/2/1963	3		 SSN	130-58-66	608		
Full Home Address	19 Acader	my st Pleasa	ntville, NY 10570					
Home Phone	(619) 368	-6220	Cell Phone		Email	msc@gmcplu	umbingandheating.com	
Own/Rent	\$ <u>0 Own</u>		— Years There	13 years	orivers Lience # 6	91459711 Sta	ate NY	
Owner #2 Name				Title	·			
Date of Birth				SSN				
Full Home Address								
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There	D	rivers Lience #	Sta		-
Business Home Bas	ed?	Yes Lo	ocation: Lease/C	Owned	Lease Terr	mI	Monthly Rent	
Landlord / Mortgage	e Co. <u>10</u>	00% owned	I		Conta	act <u>none</u>	9	
Contact Phone	_			Cell _		Email		
Bank Name/Branch	Chase		Conta	act Pleasan	tville Branch	Phone		
Trade Reference#1			Conta	act		Phone		
Trade Reference#2			Cont	act		Phone		
Trade Reference#3			Conta	act		Phone		
I hereby represent that all	the above inf	ormation is tru	ue and understand th	nat making false sta	tements might be con	sidered fraud. By providing	the above information, 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	Michael Casarella	Date	07/24/2018