

DBA Name	SANTIN AUTO AND TRUCK REPAIR CENTER		Legal Name	SANTIN AUTO AND TRUCK REPAIR CENTER	
Type of Business	SERVICES		Tax ID	275005469	LLC
Full Business Address	11307 PERRIN BEITEL RD.				
Full Billing Address					
Phone at Location	(210) 648-4100		Best Phone	(210) 367-9720	Fax (210) 648-4101
Business Email	ESANTIN@SANTINAUTO.COM		Website	WWW.SANTINAUTOMOTIVE.COM	
Years In Business	6	Average Ticket		Gross Annual Sales	1,500,000.00
Do you currently have cash advance?	Yes	With who?		Balance	30,000
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

Owner #1 Name	ESTEBAN SANTIN		Title	PRESIDENT	
Date of Birth	1975-12-26		SSN	633-54-6729	
Full Home Address	7603 TRIPLE WOOD				
Home Phone	(210) 367-9720	Cell Phone		Email	ESANTIN@SANTINAUTO.COM
Own/Rent	\$ 0 Own	Years There	4	Drivers Lience #	17699056
				State	TEXAS
Owner #2 Name			Title		
Date of Birth	0000-00-00		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	6 months	Monthly Rent	4,000.00
Landlord / Mortgage Co.	KOMBOSH TRUST			Contact	TERRY		
Contact Phone	(830) 387-4194	Cell		Email			

Bank Name/Branch	SSFCU	Contact	ANYONE	Phone	(210) 357-9000
Trade Reference#1	JASPER ENGINES	Contact	BOB	Phone	(210) 347-2910
Trade Reference#2	BLUEBONNET FORD	Contact	HECTOR	Phone	(830) 606-1006
Trade Reference#3	FULL SERVICE OEM PARTS	Contact	DALE	Phone	(210) 260-2967

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	Date
	ESTEBAN SANTIN	04/19/2017