

									<b>-</b>			
DBA Name		Jmt Contr		<u> </u>		egal Na	ime		n Testa			
Type of Business		construct			Т	ax ID		47-	5119735			Sole Prop
Full Business Addre	SS.	16 Silver L	_ake Rd									
Full Billing Address												
Phone at Location		(603) 465-7232				Best Phone (603		3) 554	) 554-0188 Fax			
Business Email		jmtcontracting@gmail.com			Website		jmtcontractingllc.com					
Years In Business		9		Average Ti	icket			Gros	ss Annual S	ales	200,000.00	)
Do you currently h	ave cash	advance?		No	With who?					Bal	ance	
Current Credit Card Processor						_	Average	Proce	essing Volur	ne		
Last Month Vol.			#of Ticke	ets		2nd M	lonth Vol.			#of	Tickets	
3rd Month Vol.			#of Ticke	ets		4th M	onth Vol.			#of	Tickets	
O #1 No	laba Tast	_			T:11 a		0					
Owner #1 Name	John Test				Title		Owner 022-62-00	050				
Date of Birth Full Home Address	09-28-19				SSN –	l	022-02-00	039				
	16 Silver		Cell Ph		(603) 554-0	n100	Email		imtcontr	octing@	amail com	
Home Phone	(603) 465						Email - · "	00t-:01	-		gmail.com	
Own/Rent	\$ <u>0 Ren</u>	<u> </u>	Years	There $\frac{2}{}$	L	rivers Li	ience # <u>0</u>	)9taj81	281	_State	NH	
Owner #2 Name					Title	2						
Date of Birth					– SSN	l						
Full Home Address					_							
Home Phone			Cell Ph	ione			Email					
Own/Rent	\$		Years	There _		Orivers Li	ience # _			State		
Business Home Bas	sed?	No L	ocation:	Lease/Owi	n Leased	l 1	Lease Ter	m		Mon	thly Rent	
	-					<u> </u>					,	
Landlord / Mortgage	e Co						Conta	act	_			
Contact Phone	_			Ce	ell <u> </u>			_	Email	_		
Bank Name/Branch				Contact					Phone			
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 tr	ue and und	erstand that i	making false sta	atements	might be con	nsidered	fraud. By prov	iding the a	above informati	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	John Testa	Date	07/28/2016