

DBA Name		Watercra	ft Irrigation	Inc	Le	gal Name	<u> </u>	Natercraft Irri	gation Inc		
Type of Business		Commerc	ial Park irri	gation	Tā	x ID	<u> </u>	264163898			Corp
Full Business Addre	SS	173 north	main st								
Full Billing Address											
Phone at Location ((800) 685-8361			E	Best Phone (516) 7			Fax		
Business Email		scaper@\	watercraftir	rigation.	com	Website					
Years In Business		10	Ave	erage Tio	ket		_	iross Annual S	ales <u>:</u>	2,000,000.00	
Do you currently ha	ave cash a	advance?	Yes	s \	With who? <u>F</u>	unding circl	e		Bala	nce <u>150,000</u>	
Current Credit Card	l Processo	or				Ave	rage Pr	ocessing Volur	me		
Last Month Vol.			#of Tickets			2nd Month	Vol.		#of T	ickets	
3rd Month Vol.			#of Tickets			4th Month	Vol.		#of T	ickets	
Owner #1 Name	robert im	hoff			Title	presi	dent				
Date of Birth	09231967				- SSN	<u></u>	58-1606				
Full Home Address	100 Hillar				-						
Home Phone	(516) 790	-	Cell Phone		(516) 790-3	459 Emai	 I	scaner@	watercraft	irrigation.com	
Own/Rent	\$ 0 Own		— Years The			rivers Lience		793456	State	ny	
· · · · · · · · · · · · · · · · · · ·	¥ <u>* * * * * * * * * * * * * * * * * * *</u>	<u>- </u>								<u>,</u>	
Owner #2 Name					Title						
Date of Birth					- SSN						
Full Home Address					-						
Home Phone			Cell Phone	9		Emai	I				
Own/Rent	\$		Years The	ere	Dı	rivers Lience	#		State		
Business Home Bas	ed?	No L	ocation: Le	ase/Own	Leased	Lease	Term		Montl	nly Rent	
Landlord / Mortgage	 e Co.						Contact				
Contact Phone				Ce	II			Email	_		
Bank Name/Branch	Chase E	Bank		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	uo and undoret	and that m	aking falso stat	omonts might h	o conside	arod fraud. By prov	viding the ak	ovo information t	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	robert imhoff	Date	02/04/2020