

DBA Name		clear water solutions		Legal Name [D.M.P. WATE	D.M.P. WATER SOLUTIONS INC.	
Type of Business		clear water solutions		Tax ID		clear water solutions		Corp
Full Business Addre	SS	163 GRAN VIA						
Full Billing Address								
Phone at Location		(714) 349-4812		Best Phone (714)		349-4812	Fax	
Business Email		DENNIS@CWSCAL.COM		Website				
Years In Business		5	Average Tick	cet		Gross Annual Sales 340,000.00		
Do you currently ha	ave cash a	advance?	Yes W	ith who? <u>Lo</u>	an Me. MCA		Balance <u>8,000</u>)
Current Credit Card Processor					Average I	Processing Vol	ume	
Last Month Vol.		#of Tic	kets	2	2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tic	kets		4th Month Vol.		#of Tickets	
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Owner #1 Name	DENNIS P			Title	Owner	20		
Date of Birth	10/08/52			SSN	573-96-718	38		
Full Home Address	163, GRA			/=- 1\ 0.10 10·				
Home Phone				. ,	714) 349-4812			
Own/Rent	\$ 0 Rent	t Yea	rs There 2	Driv	vers Lience # AC	308951	State Califo	<u>rnia</u>
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	rs There	Driv	vers Lience #		State	
Business Home Bas	ed?	Yes Location	n: Lease/Own	Leased	Lease Term	n Monthly	Monthly Rent	1,550.00
Landlord / Mortgage	—— e Co. <u> </u>	IARRY CONSTANT	INE		 Contac	ct	CA	
Contact Phone	(6	610) 392-3991	Cell			_ Email		
Bank Name/Branch	CHASE		Contact			Phone	(994) 982-3950	
Trade Reference#1	TOMAR	TOMAR WATER Contact		ERIN		– Phone	(760) 510-9770	
Trade Reference#2	EXPRES	SS PIPE	 Contact	JEFF		– Phone	(951) 684-8448	
Trade Reference#3	NIMBUS	S WATER	Contact	SALES		Phone	(800) 451-9343	

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	DENNIS POORE	Date	03/16/2017
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