	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name		TNG Contract	tors	Logal	Name	TNG Contractors		
			neral Contractor					LLC
Type of Business		-		Tax I	J	45-4344520		LLC
Full Business Addre	SS	74 Trimble St.	, Nashville TN 37	210				
Full Billing Address		(645) 242 27			1			
Phone at Location		(615) 313-37	33		t Phone		Fax	
Business Email					Website			
Years In Business		6	Average Ticl	ket		Gross Annual Sale	es <u>1,200,000.00</u>	
Do you currently ha	ave cash a	advance?	Yes W	ith who? see	attached list		Balance <u>1035000</u>	
Current Credit Card	d Processo	or			Average	Processing Volume	<u> </u>	
Last Month Vol.		#of	Tickets	2n	d Month Vol.		#of Tickets	
3rd Month Vol.		#of	Tickets	4t	n Month Vol.		#of Tickets	
_								
Owner #1 Name	Akbar Ara			Title	Principal			
Date of Birth	04281950			SSN	577-78-18	62		
Full Home Address		nwood Blvd, Nas						
Home Phone	(615) 394	1-4196 C	ell Phone -		Email	akbar@tng ———	contractors.com	
Own/Rent	\$ <u>0 Ren</u>	<u>t</u> \	ears There	Drivers Lience #		State		_
Owner #2 Neme				Title				
Owner #2 Name  Date of Birth				SSN				
Full Home Address				2211				
Home Phone			tell Phone		Email			
Own/Rent	\$		- ears There	Drive	rs Lience #		State	
					_			_
Business Home Bas	ed?	No Loca	tion: Lease/Own	Leased	Lease Terr	n	Monthly Rent	
Landlord / Mortgage	e Co				Conta	ct		
Contact Phone	_		Cell			Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			Contact	_ <del></del>		Phone		
Trade Reference#2			Contact			Phone		
Trade Reference#3			Contact			Phone		
I hereby represent that all	the above in	formation is true as	nd understand that ma	king false stateme	ants might he cons	idered fraud. By providi	ing 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Akbar Arab	Date	06/21/2017