

DBA Name		harbor pa	ark realt	y IIc	L	egal	Name	harbor park	realty llc		
Type of Business		real esta	te mana	gement	T	ax II)	11-3490233			LLC
Full Business Addre	ess.	1019 fort	salonga	road							
Full Billing Address											
Phone at Location		(516) 52	8-5141			Best	Phone		Fax		
Business Email							Website				
Years In Business		20+		Average Tic	ket			Gross Annual	Sales	1,100,000.00	
Do you currently h	ave cash a	advance?		No \	Vith who? _				_ Bal	lance	
Current Credit Card	d Processo	r				_	Average	Processing Vo	lume		
Last Month Vol.			#of Tick	ets		2nd	d Month Vol.		_ #of	Tickets	
3rd Month Vol.			#of Tick	ets		4th	n Month Vol.		#of	Tickets	
Owner #1 Name	JACOB AD	ONI			Title	2	manging m	nember			
Date of Birth	06-12-19	 58			SSN	ı	106-60-929	98			
Full Home Address	19 CHEST	NUT HILL D	RIVE								
Home Phone	(516) 528		Cell Pl	none			Email	jayado	ni@yahoo.	.com	
Own/Rent	\$ <u>0 Own</u>	<u> </u>	— Years	There		Driver	rs Lience #		State	NY	
Owner #2 Name					Title	9					
Date of Birth					SSN	I	-				
Full Home Address											
Home Phone			Cell Pl	none			Email				
Own/Rent	\$		Years	There	D	Oriver	rs Lience #		State		
Business Home Bas	sed?	No L	_ocation:	Lease/Own	Owned	l	Lease Tern	n	Mon	thly Rent	
Landlord / Mortgage	e Co						Conta	ct			
Contact Phone	_			_ Cel	l _			_ Emai	l <u> </u>		
Bank Name/Branch	BNB			Contact	Holly Bl	ackv	vell	Phone	(631) 5	37-1000	
Trade Reference#1	BBW			Contact	Stuart			Phone	(212) 2	44-5670	
Trade Reference#2	P. White	industrie:	S	Contact	Patrick			Phone	(516) 6	50-4380	
Trade Reference#3	Aiello Pl	umbing		Contact	Mike			– Phone –	(631) 4	84-7702	
I hereby represent that all	the above in	formation is t	rue and un	derstand that m	aking false sta	ateme	nts might be cons	idered fraud. By p	roviding the	above information.	the annlicant(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	jay adoni	Date	10/01/2018