Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.58

DBA Name		HWH Environmental/Hazardous Waste Haulers, Inc.				HWH Environmental/Hazardous Waste Haulers, Inc.				
Type of Business	Waste Disposal		т		x ID	45-5451091		Corp		
Full Business Address	21745 M	loni Dr., New	Lenox, IL 6	0451						
Full Billing Address										
Phone at Location	(847) 9	(847) 902-6776			Best Phone (847) 902-6776 Fax		(815) 361-2451			
Business Email	mark@	mark@hwhenv.com			Website	hwhenvironm	m			
Years In Business	8	Av	verage Ticke	et		Gross Annual S	Sales	1,950,000.00		
Do you currently have	e cash advance?	N	o Wi	ith who?			Bala	ance		
Current Credit Card Processor Average Processing Volume										
Last Month Vol.		#of Tickets	5		2nd Month Vol.		#of	Tickets		
3rd Month Vol.		#of Tickets	s		4th Month Vol.		#of	Tickets		
Owner #1 Name	Mark Chocola			Title	CEO/Presio	dent				
Date of Birth 0)3181967			SSN	328-72-51	57				
Full Home Address 1	.9725 Breckenridg	e Dr.								
Home Phone (8	847) 902-6676	Cell Phor	ne (847) 902-67	76 Email	mark@	hwhenv.co	om		
Own/Rent	\$ <u>0 Own</u>	 Years Th	nere 12	Dri	ivers Lience # C	240550607080	State	<u>IL</u>		
Owner #2 Name				Title						
Date of Birth Full Home Address				SSN						
Home Phone		Cell Phor	ne		Email					
_	\$	—— Years Th	_	Dri	ivers Lience #		State			
	<u> </u>	_						 		
Business Home Based	d? No	_Location: Lo	ease/Own	Owned	Lease Terr	n	Mon	thly Rent		
Landlord / Mortgage (Co				Conta	ct				
Contact Phone			Cell			Email	_			
Bank Name/Branch	Chase Bank		Contact	Mokena	Branch Manage	er Phone	(815) 4	164-9506		
Trade Reference#1	Ecoflo		Contact	Account	ing	 Phone	(336) 8	355-7925		
Trade Reference#2	Covanta Holding	js	Contact	account	ing	— Phone	(864) 9	950-8749		
	Drug and Labora Dispo	atory	Contact	Account	ing	Phone	(800) 6	585-9824		

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	Mark Chocola	Date	12/03/2019
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