

DBA Name		Wassman nlumb	oing & heating, Ile	r la	gal Name	Wassman Plumh	ing & Heating IIC	
Type of Business		Plumbing		Tax ID		Wassman Plumbing & Heating, LLC 47-2242355		LLC
Full Business Addre		Po bix 884		ıa	X ID	47-2242333		LLC
	:55	PO DIX 664						
Full Billing Address Phone at Location		(507) 720-6564			Past Dhana		Fav	
		(507) 720-0504		6			Fax	
Business Email			A Tislet		Website		250,000,00	
Years In Business		4	Average Ticket			Gross Annual Sal	-	
Do you currently ha	ave cash a	advance?	No With	n who?			Balance	
Current Credit Card Processor			Average		Processing Volume			
Last Month Vol.		#of Tic	kets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tic	kets		4th Month Vol.		#of Tickets	
				_				
Owner #1 Name	Kylian Wa	assman		Title	Preaident			
Date of Birth	03/05/19	76		SSN	477-86-589	90		
Full Home Address	Po bix 88	4						
Home Phone	(507) 720	0-6563 Cell	Phone		Email	wassmanp	lumbing@gmail.com	
Own/Rent	\$ <u>0 Own</u>	\$ 0 Own Years There		Drivers Lience #		State		_
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	rs There	Dr	ivers Lience #		State	_
Business Home Bas	od2	No Location	n: Lease/Own	Owned	Lease Tern	•	Monthly Pont	
		Location	i. Lease/Owii	Owned			Monthly Rent	
Landlord / Mortgage	e Co				Conta			
Contact Phone	_		Cell			Email		
Bank Name/Branch	Mn valle	ey cresit union	Contact			Phone		
Trade Reference#1			– – Contact			–		
Trade Reference#2			– – Contact			– — Phone		
Trade Reference#3			Contact			Phone		
I haraby rapresent that all	the above in	formation is true and :	nderstand that making	a false stat	amonts might be seen	idorod fraud. By provid	ng 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Kylian Wassman	Date	03/20/2019