

Type of Business	DBA Name		Cold Iron Excava	tion	Leg	al Name	Cold Iron Exc	cavation	
Full Billing Address	Type of Business		Construction		Tax ID		47-3584865	47-3584865	
Phone at Location	Full Business Addre	SS	178 Lilac Ave						_
Business Email	Full Billing Address								
Years In Business 2 Average Ticket Gross Annual Sales 200,000.00 Do you currently have cash advance? No With who? Balance Current Credit Card Processor Average Processing Volume Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets 4th Month Vol. #of Tickets #of Tickets #of Tickets 5value \$0 ver \$ver \$ver <td colspan="3">Phone at Location (406) 499-2277</td> <td></td> <td> Ве</td> <td>est Phone (40</td> <td>6) 539-6116</td> <td>Fax</td> <td></td>	Phone at Location (406) 499-2277				Ве	est Phone (40	6) 539-6116	Fax	
Do you currently have cash advance? No With who? Average Processing Volume Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets Owner #1 Name Date of Birth 02-15-1988 5SN 529-79-8794 Home Phone (406) 539-6116 Cell Phone (406) 539-6116 Email tronass8@gmail.com Own/Rent \$ 0 0wn Years There 3 Drivers Lience # 021211984115 State Montana Own/Rent \$ 5SN	Business Email	tronaas.coldironex@gr			<u>n</u>	Website			
Current Credit Card Processor Average Processing Volume Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets Owner #1 Name Matthew Tronaas Title Owner Date of Birth 02-15-1988 SSN 529-79-8794 Full Home Address 178 Lilac Ave Home Phone (406) 539-6116 Email tronaas88@gmail.com Own/Rent \$ 0 Own Years There 3 Drivers Lience # 021211984115 State Montana Own/Rent #2 Name Title SSN SSN SSN SSN SSN SSN Montana Montana Montana SSN Montana SSN Montana SSN Montana SSN	Years In Business		2	cet Gross Annual Sales <u>200,</u>			0,000.00		
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Owner #1 Name Matthew Tronaas Title Owner Date of Birth 02-15-1988 SSN 529-79-8794 Full Home Address 178 Lilac Ave Full Home Address 178 Lilac Ave Home Phone (406) 539-6116 Cell Phone (406) 539-6116 Email tronaas8@gmail.com Own/Rent \$ 0 Own Years There 3 Drivers Lience # 021211984115 State Montana Owner #2 Name Title Date of Birth SSN Fmail Full Home Address Home Phone Cell Phone Email Own/Rent \$ Years There Drivers Lience # State Business Home Based? Yes Location: Lease/Own Owned Lease Term Monthly Rent Landlord / Mortgage Co. Britteny Hyde Contact Contact Phone Cell Email Bank Name/Branch Wells Fargo Contact Crystal Debell Phone (406) 508-3381 Trade Reference#1 Summit rentals	Current Credit Card	l Processo	or			Averag	e Processing Vo	lume _	
Owner #1 Name Matthew Tronaas Title Owner Date of Birth 02-15-1988 SSN 529-79-8794 Full Home Address 178 Lilac Ave Home Phone (406) 539-6116 Cell Phone (406) 539-6116 Email tronaas88@gmail.com Own/Rent \$ 0 Own Years There 3 Drivers Lience # 021211984115 State Montana Own/Rent S SN SSN Full Home Address Home Phone Cell Phone Email Own/Rent \$ Years There Drivers Lience # State Business Home Based? Yes Location: Lease/Own Owned Lease Term Monthly Rent Landlord / Mortgage Co. Britteny Hyde Contact Cell Email Bank Name/Branch Wells Fargo Contact Crystal Debell Phone (406) 586-3381 Trade Reference#1 Summit rentals Contact Jordan Phone (406) 600-4111	Last Month Vol.		#of Tick	cets		2nd Month Vol		#of Ticl	cets
Date of Birth 02-15-1988 SSN 529-79-8794 Full Home Address 178 Lilac Ave Home Phone (406) 539-6116 Cell Phone (406) 539-6116 Email tronaas8@gmail.com Own/Rent \$ 0 0wn Years There 3 Drivers Lience # 021211984115 State Montana Owner #2 Name Title SSN	3rd Month Vol.		#of Tick	cets		4th Month Vol.		#of Ticl	cets
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Contact Phone Cell Email Bank Name/Branch Wells Fargo Contact Crystal Debell Phone (406) 586-3381 Trade Reference#1 Summit rentals Contact Jordan Phone (406) 600-4111	Business Home Bas	ed?	Yes Location	: Lease/Own	Owned	Lease Te	erm	Monthly	Rent
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Trade Reference#1 Summit rentals Contact Jordan Phone (406) 600-4111	Contact Phone			_ Cell			Emai	l	
	Bank Name/Branch	Wells F	argo	Contact	Crystal De	ebell	Phone	(406) 586-3	3381
Trade Reference#2 Titan Machinery Contact Steve Phone (406) 259-5500	Trade Reference#1	Summit	t rentals	_ Contact	Jordan		Phone	(406) 600-4	1111
	Trade Reference#2	Titan M	lachinery	Contact	Steve		Phone	(406) 259-5	5500
Trade Reference#3 Contact Phone	Trade Reference#3			Contact			Phone		

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	Matthew Tronaas	Date	02/14/2017