NEW ACCOUNT CHECKLIST

CUSTODIAL ACCOUNT

IRREVOCABLE LIFE INSURANCE TRUST, PENSION PLAN, PROFIT SHARING PLAN, OR 401(K) PLAN)



Copy of a Valid Government Issued Photo Identification for two (2) authorized signers Drivers License State Issued Identification or Passport

For Custodial Plan, the following documentation is required: Legal Plan/Trust Name and Effective Date Name(s) of Trustee(s), Insurer(s), Administrator(s), and/or Custodian Power or authority of the Trustee(s) to invest Plan/Trust Assets Submitted Plan/Trust Documentation must include the signature page of the Plan/Trust



Custodial Account Application

CUSTODIAL

UTMA/UGMA ACCOUNT



W-9 Form for the Minor (executed by the Guardian)

Copy of a Valid Government Issued Photo Identification for Guardian Drivers License State Issued Identification or Passport

Custodial Account Application



6700 Via Austi Parkway, Suite 300 Las Vegas, NV 89119 PHONE 702.739.9053 | 877.739.9094 FAX 702.739.7735 IGNITEFUNDING.COM



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INVESTOR ACCOUNT FORM

Where did you hear about Ignite Funding?

SECTION 1 | Type of Account Account Type

REQUIRED DOCUMENTATION FOR CUSTODIAL ACCOUNTS

Irrevocable Life insurance Trust, Pension Plan, Profit Sharing Plan and 401(k) Plan:

- Plan/Trust Documents and/or Adoption Agreement must be provided and include the following:
 - Legal Plan/Trust Name and Effective Date
 - Name(s) of the Trustee(s), Insurer(s), Administrator(s) and/or Custodian
 - Power or authority to invest Plan/Trust Assets
 - Submitted Plan/Trust Documentation must include the signature page of the Plan/Trust
- W-9 Form for Taxable entity
- Identification for two (2) authorized signers of the Plan/Trust. Additional signers can be added by completing an Interested Party Designation Form.

Uniform Transfers of Minor Act (UTMA) or Uniform Gifts to Minors Act (UGMA) Account:

- UTMA/UGMA Documents must be provided and include the following:
 - W-9 Form for the Minor (executed by the Guardian)
 - Copy of Government Issued Identification for Guardian

SECTION 2 | For Pension Plan, Profit Sharing Plan and 401(k) Plan Accounts Only

[The Custodial Plan will be the responsible entity for IRS tax reporting purposes unless otherwise defined.]

Custodial Plan Name						
CUSTODIAN INFORMATION (if applicable)						
Name of Plan Custodian	Custodial Plan EIN Is the Custodian the taxable entity? Yes No					
Plan Custodian Address						
Plan Custodian City	Plan Custodian State Plan Custodian Zip Code					
Plan Custodian Phone	Plan Custodian E-mail Address					
ADMINISTRATOR INFORMATION (if applicable)						
Name of Plan Administrato	or					
Plan Administrator Addres	s					
Plan Administrator City	Plan Administrator State Plan Administrator Zip Code					
Plan Administrator Phone	Plan Administrator E-mail Address					

SECTION 3 | Authorized Primary Account Owner Information [Authorized signer(s) to make investments on behalf of the Plan.]

Marital Status: Single Married Authorized Prim	hary Salutation Authorize Primary Plan Title (if applicable)			
	Example: Trustee, Manager, etc.			
Authorized Primary First Name	Authorized Primary Middle Name			
Authorized Primary Last Name	Authorized Primary Suffix Authorized Primary DOB			
Authorized Primary SSN The SSN will only be used for verification purposes, if the Plan is the taxable entity. For plan accounts without a custodian EIN identified the Authorized Primary Account Owner will be the taxable person and must provide an electronic copy of Form W-9 (Department of the Treasury IRS) for tax purposes.				
Authorized Primary Address				
Authorized Primary City	Authorized Primary State Authorized Primary Zip Code			
Authorized Primary Phone Number	The Authorized Primary Phone Number will be the phone number used for all telephonic correspondence related to this account.			
Authorized Primary E-mail Address	The Authorized Primary E-mail Address will be the email address used for all electronic correspondence related to this account.			
Authorized Primary Type of Government Issued ID	Authorized Primary ID #			
Authorized Primary ID Expiration Date An electronic copy of a Government Issued ID (Driver's License, State Issued Identification or Passport) is required to be provided for verification purposes.				
SECTION 41 Authorized Secondary A	c_{count}			

Marital Status: OSingle OMarried Authorized Secondary Salutation	on Authorize Secondary Plan Title (if applicable)			
	Example: Trustee, Manager, etc.			
Authorized Secondary First Name	Authorized Secondary Middle Name			
Authorized Secondary Last Name	Authorized Secondary Suffix Authorized Secondary DOB			
Authorized Secondary SSN without a c	ill only be used for verification purposes, if the Plan is the taxable entity. For plan accounts ustodian EIN identified the Authorized Primary Account Owner will be the taxable person and must electronic copy of Form W-9 (Department of the Treasury IRS) for tax purposes.			
Authorized Secondary Address				
Authorized Secondary City	orized Secondary State Authorized Secondary Zip Code			
Authorized Secondary Phone Number	The Authorized Secondary Phone Number will be the phone number used if the Authorized Primary Phone Number is disconnected or non-repsonsive.			
Authorized Secondary E-mail Address	The Authorized Secondary E-mail Address will be the email address used for all electronic correspondence related to the investments.			
Authorized Secondary Type of Government Issued ID	Authorized Secondary ID #			
Authorized Secondary II.) Expiration Date I	Authorized Secondary ID Expiration Date An electronic copy of a Government Issued ID (Driver's License, State Issued Identification or Passport) is required to be provided for verification purposes.			

SECTION 5 | FOR UTMA/UGMA ACCOUNTS ONLY [The Minor will be the responsible person for IRS tax reporting purposes.]

MINOR INFORMATION				
Minor First Name Mino	or Middle Name Minor Last Name			
Minor DOB Minor SSN	An electronic copy of the Minor's Social Security Card is required for verification purposes.			
Minor Address	Minor City Minor State Minor Zip Code			
GUARDIAN INFORMATION				
Guardian First Name Gua	rdian Middle Name Guardian Last Name			
Guardian Address	Guardian City Guardian State Guardian Zip Code			
Guardian Phone	The Guardian Phone Number will be the phone number used for all telephonic correspondence related to this account.			
Guardian E-mail Address	The Guardian E-mail Address will be the email address used for all electronic correspondence related to this account.			
Guardian Type of Government Issued ID	Guardian Government ID #			
Guardian ID Expiration Date An electronic copy of a Government Issued ID (Driver's License, State Issued Identification or Passport) is required to be provided for verification purposes.				

SECTION 6 | Interested Party Designation

Account Owners may add an Interested Party Designee to their account. The designated individual will be entitled to request and receive general account information, including, but not limited to; account balance, loan information, payment details, transaction details and tax information. The designated individual may not execute any transactions on behalf of the account holder or make any changes to the account. Additionally, Account Owners may further designate the named Interested Party Designee as a Trusted Contact, in the event that Ignite Funding has reason to be concerned that the Account Owner is experiencing a fraud, health crisis or another emergency that may affect their financial affairs.

O l/we wish to add the following individual as an Interested Party Designee to my/our account, which grants the named individual tha ability to discuss my account with Ignite Funding but not execute documents to make changes to the account.

Individual Name	
Relationship	
Phone Number	
Email Address	

I/we also wish to designate the above-named individuals as a Trusted Contact on my/our account, which permits Ignite Funding the ability to contact the designee o in the event they are concerned that a fraud, heath crisis or other emergency is affecting my account or financial affairs. I/we understand, I/we am not required to designate anyone as a Trusted Contact to my/our account. If no designation is made Ignite Funding will not be able contact anyone about my account in these circumstances.

C l/we do not wish to add an Interested Party Designee to my/our account. Information about my/our account may only be discussed and shared with the account Owner(s).

Account Owners may remove or add Interested Party Designees and Trusted Contacts to their account at any time through written direction to Ignite Funding.

secтion ⁊ ј Client Relationship Questions						
Is the <u>Authorized Primary</u> or <u>Guardian</u> related to an employee at Ignite Funding?	∩ No	OYes	If yes, Name of Employee		Relationship	
Is the Authorized Secondary related to an employee at Ignite Funding?	∩ No	OYes	If yes, Name of Employee		Relationship	

SECTION 8 | Suitability Requirements

Pursuant to NRS 645B, investors must meet minimum financial requirements in order to invest in a mortgage loan.

Before an investor may invest in any mortgage loan, the investor must verify that he/she meets one or more of the following financial requirements:

- The household net worth is more than \$250,000.00, excluding any equity in any real property used as the primary residence at the time of the investment; or
- The household net income was more than \$70,000.00 for each of the previous 2 tax years and there is a reasonable expectation of attaining or exceeding the same income for the current year.

The total investments in mortgage loans transacted by a mortgage broker or mortgage agent are not valued at more than 50% of the investor's net worth or net annual income.

Ignite Funding reserves the right to restrict from further investing or close an account upon final payoff at any time if Ignite Funding has reasonable cause to believe that a client no longer meets the financial suitability requirements set forth or capacity to make informed decisions about his/her investments.

By my/our initials below, I/we agree and acknowledge that I/we meet the minimum financial requirements in order to invest in a mortgage loan.

Authorized Primary or Guardia	n Initials	
Authorized Secondary Initials]

section 9 | Disbursement Profile

All disbursements of monthly interest payments and/or loan pay downs/payoffs will be automatically deposited into the the bank account as defined by the instructions below. Ignite Funding highly recommends verifying that the bank account and routing number are accurate with your financial institution as Ignite Funding cannot be held responsible for inaccurate information being provided.

Select Bank Account Type	Bank Name	
Bank <u>Account</u> #		
Bank <u>Routing</u> #		

SECTION 10 Acknowledgment

Agreement to Receive Investment Notifications via Text

By providing your mobile number, you agree that Ignite Funding may send you periodic mobile text messages containing but not limited to new investment opportunities, client reviews/feedback, and survey responses. You will receive up to 5 messages per month. Depending on investment offerings, this number can increase. You may unsubscribe at any time by texting the word "STOP" to the 702-919-4281.

You may receive a subsequent message confirming your opt-out request. Message and data rates may apply. United States Participating Carriers Include AT&T, T-Mobile®, Verizon Wireless, Sprint, Boost, U.S. Cellular®, MetroPCS®, InterOp, Cellcom, C Spire Wireless, Cricket, Virgin Mobile and others.

By subscribing or otherwise using the service, you acknowledge and agree that we will have the right to change and/or terminate the service at any time, with or without cause and/or advance notice.

Important Information About Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law (Section 326 of the USA PATRIOT Act of 2001) requires all financial institutions to obtain, verify and record information that identifies each individual or institution who opens an account with Ignite Funding. When you open an account, we are required to obtain your name, address, date of birth, social security number or tax identification number and other information that will allow us to identify you. As appropriate, we may also request a copy of a government issued identification or other identifying documents. This information may be compared to information obtained through third-party sources, as permitted by law. If we cannot verify this information, your account may not be opened, or it may be restricted and/or closed.

Certification of Accuracy

I hereby certify that the all of the information provided on this Application is true and correct and may be relied upon by Ignite Funding for any purposes related hereto. Further, I hereby indemnify Ignite Funding, their officers, directors, shareholders, agents, employees, attorneys, insurers, insured, successors, heirs, and assigns, and any parents, affiliates, and/ or subsidiaries, for any loss, claims or damages, including legal fees which may be incurred as a result of any violations resulting from their reliance upon the information I have provided. I acknowledge that the information provided will be used to help the government fight the funding of terrorism and money laundering activities as federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. When I open an account I acknowledge that my name, address, government-issued identification number, date of birth and other information will allow Ignite Funding to identify me.

Non-Binding Arbitration and Class Action

I acknowledge my responsibility to read the Investment Overview and subsequent investment documentation disclosure for all investment selections prior to making an investment. I acknowledge that I have not received any financial, tax or legal advice from Ignite Funding and will seek the advice of my own financial, tax or legal professional.

This Agreement shall be deemed to have been made in the State of Nevada and shall be conjured and the rights and liabilities of the parties determined, in accordance with the laws of the State of Nevada.

I acknowledge that all controversies which may arise with Ignite Funding concerning this Agreement and/or the investments offered, whether entered into prior, on or subsequent to the date hereof, shall be determined by non-binding arbitration. Any non-binding arbitration under this Agreement shall be conducted pursuant to the Federal Arbitration Act and the laws of the State of Nevada before the American Arbitration Association located in Clark County, Nevada.

No person shall bring a punitive or certified class action to arbitration, nor seek to enforce any pre-dispute non-binding arbitration agreement against any person who has initiated in court a punitive class action, or who is a member of a punitive class who has not opted out of the class with respect to any claims encompassed by the punitive class until: the class certification is denied; the class is decertified; or, the customer is excluded from the class by the court.

Electronic Signature

The parties agree that the electronic signature of a party to this Agreement shall have the same legal validity and enforceability as a manually executed signature or use of a paperbased record keeping system to the fullest extent permitted by applicable law, including the Federal Electronic Signatures in Global and National Commerce Act or any similar state law based on the Uniform Electronic Transaction Act, and the parties hereby waive any objection to the contrary. This electronic signature shall be effective to bind this Agreement. The parties agree that any electronically signed document (including this Agreement) shall be deemed (i) to be "written" or "in writing," (ii) to have been signed and (iii) to constitute a record established and maintained in the ordinary course of business and an original written record when printed from electronic files. Such paper copies or "printouts," if introduced in any judicial, arbitual, mediation or administrative proceeding, will be admissible as between the parties to the same extent and under the same conditions as other original business records created and maintained in documentary form. Neither party shall contest the admissibility of the true and accurate copies of electronically signed documents based on the best evidence rule or as not satisfying the business records exception to the hearsay rule. For purposes hereof, "electronic signature" means a manually signed signature that is then transmitted by electronic means; "transmitted by electronic means" means sent in the form of a facsimile or sent via the Internet as a "PDF" (portable document format) or other replicating image attached to an e-mail message; and "electronically signed document" means a document transmitted by electronic means and containing, or to which there is affixed, an electronic signature.

I acknowledge that I have read and understand the language of the Agreement above.

Primary Account Owner or Guardian Signature	Date	
Secondary Account Owner Signature	Date	