FINANCE APPLICATION





Fax application to (801) 281-5484 or email to Info@AztecFinancial.com
OR Apply Online at www.AztecFinancial.com

	CON	MPANY INFORMATION	ALCOHOLD STREET	
Business Legal Name:		DBA (if applicable):	Years in business:	
Business Street Address:		Business Phone:		
Business City, State, Zip:				
OWNER INFO	RMATION (All ow	rners with greater than 10% o	ownership required)	
Principle/Owner Name:	Title:	Social Security No:	Email:	
Home Physical Address:		Home City, State, Zip:	Home City, State, Zip:	
Home Phone:		Cell Phone:	Cell Phone:	
Additional Owner/Spouse Name:	Title:	Social Security No:	Email:	
Home Physical Address:		Home City, State, Zip:	Home City, State, Zip:	
Home Phone:		Cell Phone:	Cell Phone:	
	EQUI	PMENT INFORMATION	经验的	
Equipment Dealer Name:		Contact:	Phone:	
Equipment/Vehicle Description:			Invoice/Quote Amount:	
	是外观的影響	CREDIT RELEASE	THE RESERVE AND ADDRESS OF THE PARTY OF THE	
partners, harmless from any liability arising from	ccessors, and assigns to ma share results of its invest mits credit investigation.	ake a complete credit investigation into our c	company, principals and guarantors, including obtaining sold Aztec Financial, LLC, its agents, assigns and lending nish a complete history of all accounts, loans, balances	
Signed by: X		Date:	Aztec Financial, LLC Ph: 1-800-644-9537	
Signed by:		Date:	Fax: 801-281-5484	
X			Info@AztecFinancial.com www.AztecFinancial.com	