



FINANCE APPLICATION

Fax application to (801) 281-5484 or e-mail to Info@AztecFinancial.com

BUSINESS INFORMATION			
Business Legal Name:		DBA (if applicable):	Time in Business:
Business Street Address:		Business Phone:	
Business City, State, Zip Code:		How did you hear about us?	
OWNER INFORMATION (all owners with greater than 10% ownership required)			
Principle/Owner Name:	Title:	Social Security No:	E-mail:
Home Physical Address:		Home City, State, Zip Code:	
Home Phone:		Cell Phone:	
Additional Owner/Spouse Name:	Title:	Social Security No:	E-mail:
Home Physical Address:		Home City, State, Zip Code:	
Home Phone:		Cell Phone:	
EQUIPMENT INFORMATION			
Equipment Dealer Name:		Contact:	Phone:
Equipment Description:			Invoice/Quote Amount:
Vehicle Description:		Equipment Credit Line Program Application:	
		yes	no
CREDIT RELEASE			
<p>I hereby authorize Aztec Financial, LLC, their successors, and assigns to make a complete credit investigation into our company, principals and guarantors, including obtaining commercial and consumer credit reports and to share results of its investigation with its lending partners. I agree to hold Aztec Financial, LLC, its agents, assigns and lending partners, harmless from any liability arising from its credit investigation. I authorize the above listed companies to furnish a complete history of all accounts, loans, balances and transaction history to Aztec Financial, LLC.</p>			
Signed By:			Date:
Signed By:			Date: