

**COMMERCIAL CREDIT APPLICATION**

Finance Program Facilitated By: Austin National Financial Solutions, LLC (866) 685-8628

Fax completed and signed to (512) 989-2174 or Email as an attachment to [info@anfpartner.com](mailto:info@anfpartner.com)**BUSINESS CONTACT INFORMATION**

Contact Name:		Email Address:	
Company name / dba:			
Address:		City:	
State:	Zip:	Web site:	
Phone:	Fax:	Cell:	
<b>Date of Organization:</b>	<b>State of Organization:</b>	<b>Federal Tax ID #</b>	<b>D&amp;B#</b>
Sole proprietorship: ( )	Partnership: ( )	Corporation (Type): ( C ) ( S )	LLC: ( )

<b>PRINCIPAL/OWNER/GUARANTOR:*</b>		<b>BUSINESS BANK:</b>		*(include separate application for additional principal/guarantor)			
<b>Principal:</b>		Title:		Ownership %:			
Address:		City/State					
Zip:	Own or Rent?	Own:	Rent:	How Long?	Years:	Months:	
Phone:		Fax:		Cell:			
Email Address:							
Social Security No.		Drivers License No./State:					
Personal bankruptcy in the past? (Yes) (No)		When?					
Do you have collection issues pending? (Yes) (No)		If Yes/What Type?					
Spouses Name (if married):							

<b>BUSINESS BANK:</b>		Address:					
City:		State:		Zip Code:			
Checking/Saving:		Account No.		Loans/Other:			
Phone:		Officer/Contact:		Email:			

<b>TRADE REFERENCES – OPEN ACCOUNTS</b>				<b>TRADE REFERENCES – OPEN ACCOUNTS</b>			
Company Name:				Company Name:			
Address:				Address:			
City/State/Zip:				City/State/Zip:			
Contact:				Contact:			
Phone/Fax:				Phone/Fax:			

<b>VENDOR/SUPPLIER:</b> (attach proposal, quote or invoice including detailed description of equipment for each vendor)							
Company Name:				Contact Name:			
Address:				City/State/Zip:			
Phone:		Fax:		Web site:			
Email:				Equipment:			

<b>AMOUNT/TERMS REQUESTED:</b> (Application request subject to credit approval. Additional information may be required)							<b>Other:</b> ↓
Amount:	Terms/Months:	12 ( )	24 ( )	36 ( )	48 ( )	60 ( )	

**AGREEMENT/SIGNATURES**

I (we) understand that any false information provided to Austin National Financial Solutions, LLC or its assigns on this application or in any other written or oral communication, for the purpose of obtaining credit, whether as the principal or guarantor, may face criminal offense under applicable law punishable by a fine and/or imprisonment. THE UNDERSIGNED CERTIFIES THAT THE UNDERSIGNED IS AUTHORIZED BY ALL PARTIES LISTED ABOVE TO AUTHORIZE YOU TO CONDUCT THE CREDIT INVESTIGATION DESCRIBED ABOVE WITH RESPECT TO ALL SUCH PARTIES. The applicant authorizes any person, company, or credit reporting agency to compile and furnish Austin National Financial Solutions, LLC or its assigns any information it may have in response to this credit request inquiry. The applicant certifies to Austin National Financial Solutions, LLC and its assigns that it is applying for credit for business purposes only, and not for personal, family, or home use. Notice: If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial if such statement is requested within sixty days from the date you are notified of the denial decision. To obtain the statement, please contact the Credit Disclosure Administrator, Austin National Financial Solutions, LLC., 3616 Far West Blvd. #117, Austin, TX 78731.

<b>SIGNED:</b>	<b>PRINTED NAME:</b>
<b>TITLE:</b>	<b>DATE:</b>