



**To apply, simply complete the credit application below and fax to: 801-255-5554**

Delivery, setup, and training charges and applicable taxes can also be financed!

APPLICANT INFORMATION

**NAME (FIRST, MIDDLE, LAST):** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_ **COUNTRY:** \_\_\_\_\_

**TIME AT CURRENT ADDRESS:** \_\_\_\_\_  **LIVE WITH PARENTS/RELATIVE**  **OWN**  **RENT**  **OTHER**

**HOME PHONE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_ **SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**CURRENT EMPLOYER:** \_\_\_\_\_ **TIME AT CURRENT JOB:** \_\_\_\_\_

**MONTHLY NET INCOME (FROM ALL SOURCES):** \_\_\_\_\_ **EMPLOYER'S PHONE:** \_\_\_\_\_

**1ST ID#**  **DRIVER'S LIC**  **STATE ID**  **FEDERAL GOV'T** **ISSUANCE DATE** \_\_\_\_\_ **EXPIRATION DATE** \_\_\_\_\_

**2ND ID#** **CREDIT CARD TYPE:**  **VISA**  **MASTERCARD**  **AMEX**  **DISCOVER**

**NAME ON CREDIT CARD** \_\_\_\_\_ **CREDIT CARD NUMBER** \_\_\_\_\_ **EXP DATE** \_\_\_\_\_

*Complete only if using a co-applicant.*

CO-APPLICANT INFORMATION

**NAME (FIRST, MIDDLE, LAST):** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_ **COUNTRY:** \_\_\_\_\_

**TIME AT CURRENT ADDRESS:** \_\_\_\_\_  **LIVE WITH PARENTS/RELATIVE**  **OWN**  **RENT**  **OTHER**

**HOME PHONE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_ **SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**CURRENT EMPLOYER:** \_\_\_\_\_ **TIME AT CURRENT JOB:** \_\_\_\_\_

**MONTHLY NET INCOME (FROM ALL SOURCES):** \_\_\_\_\_ **EMPLOYER'S PHONE:** \_\_\_\_\_

**AMOUNT TO BE FINANCED:** \_\_\_\_\_ **DEALER NAME OR SALES REP:** \_\_\_\_\_

**EQUIPMENT:**  **TINLIZZIE18 ESP**  **TL18 SITDOWN**  **ANSLEY26 ESP**  **QUILT MAGICIAN**  **PHOENIX**  **FALCON**

Each individual signing as principal certifies that the information provided in this application is accurate and complete. Each individual signing authorizes TinLizzie18 or any other lending sources to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and /or extension of the business credit requested, but also for purposes of reviewing the account, increasing the credit line, taking collection action on the account and for any other legitimate purpose associated with the account as needed. Each individual signing as principal further waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_