**FP-01 – Nuevo cliente**

**DATOS PERSONALES**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_|

Nombre A. Paterno A. Materno

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Dirección (Calle / Colonia / Ciudad)

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Referencias

Casa rentada

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| Casa propia

Celular Correo electrónico

**DATOS DEL NEGOCIO**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| Local Fijo

Nombre Tipo (Taquería, Pozoleria, etc.) Local Ambulante

Local rentado Local propio Empleado del lugar

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Dirección (Calle / Colonia / Ciudad)

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Referencias

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Celular Correo electrónico

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Nombre y firma del facilitador Nombre y firma del cliente

* *Se requiere copia a color del (INE).*