



# FINANCE APPLICATION

## Consumer Finance Solutions LLC

13101 Washington Blvd, Los Angeles CA 90066 • www.csfinsolutions.com  
Phone: (773) 690-0522

### COMPANY INFORMATION

Company Name: asdf	DBA:		
Address: asdf	City: asdf	State: asdf	ZIP: asdf
Business Phone: 213-875-1856	Date Business Started: 02-25-2025		
Email Address: mora@example.net	TAX ID: asdf		

### OFFICER(S), PARTNER(S) OR GUARANTOR(S)' INFORMATION

Name 1: Jennifer Mora	Title:	Ownership %: 100	
Address: Some Random Street Name 3/5	City: asdf	State: asdf	ZIP: asdf
DOB: 02-26-2025	SSN: 945-21-5205		
Phone Number: 213-875-1856	Email Address: mora@example.net		
Name 2:	Title:	Ownership %:	
Address:	City:	State:	ZIP:
DOB:	SSN:		
Phone Number:	Email Address:		

### COMPANY BANK REFERENCES

Bank 1 Name:	Length of Relationship:
Officer's Phone Number:	Officer's Name:
Bank 2 Name:	Length of Relationship:
Officer's Phone Number:	Officer's Name:

### EQUIPMENT INFORMATION

Type:	Projected cost:
Vendor:	
Contact Phone Number:	Name:
The submission of this application with a facsimile signature(s) will have the same validity and effect as if it bore an original ink signature(s). I hereby affirm that the information contained within this file is true and accurate. The applicant, owner(s), and guarantor (if applicable) authorize Consumer Finance Solutions or its designated representative(s) or assignee(s) to obtain any information it may request from any business or consumer reporting agencies or other sources that provide credit reports, account history information, credit and employment history, or similar information; this authorization shall also extend to updating, renewing, or reviewing the credit and collecting the account.	
Guarantor 1 Name:	Signature: Date: 03-14-2025
Guarantor 2 Name:	Signature: Date: