

## FLOORING REQUEST FORM

Please fax to: (858) 513-1599

Date: \_\_\_\_\_

Dealer Name: \_\_\_\_\_

Invoice Number: \_\_\_\_\_

Invoice Amount: \$ \_\_\_\_\_

Flooring with:

NPA Dealer Financing \_\_\_\_\_

AFC: \_\_\_\_\_

DSC: \_\_\_\_\_

GE: \_\_\_\_\_

HDFS: \_\_\_\_\_

Approval Checked By: (NPA Employee Name) \_\_\_\_\_

Dealer Signature: \_\_\_\_\_

Fax Number (858) 513-1599

For questions please contact:

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(Corporate Office)

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