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FLOOR PLAN APPLICATION

The following documents must be submitted to Westlake Flooring Services to begin the underwriting process. Please ensure all documents are filled out completely and returned promptly.

New Applications Requests up to \$475,000

- Floor plan dealer application (attached)
- Decision Logic Form complete login
- List of Current Inventory (Full VIN and milage)
- Dealership Photos (Interior and Exterior)
- Current Receivable Statement for current floor plans

Additional documents for requests \$500,000+

- Personal Financial Statement
- Current Balance Sheet
- Current Income Statement
- Tax Returns of Owner (last two years)
- Tax Returns of Business (last two years)

Completed applications can be submitted via:

Email: dealers@wfs-flooring.com

Fax: (323) 954-5392

Mail to: Westlake Flooring
Services Attn: Flooring Dept.
4751 Wilshire Blvd. Suite 100
Los Angeles, CA 90010

Please reach out to your Area Manager

Area Manager:

Email:

Cell:



Floorplan Application

CREDIT LINE INFORMATION

Date:	Current Westlake Dealer? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Requested Floor Plan Credit Amount: \$	Lot Capacity:	
# of Units on Lot:	Monthly Units Sold:	Average Turn Time:
Average Purchase Price:	# of Units Owned:	\$ Amount of Owned Units:

COMPANY INFORMATION

Dealership Legal Name:	DBA:	
How Long in Business?	Tax Id #:	Dealer's 5 Million AA #
Physical Address:		Rent: <input type="checkbox"/> Own: <input type="checkbox"/>
Type of Business:	Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Sole Proprietor <input type="checkbox"/>	
Do You Have Additional Lots?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Additional Lot Address(es):		
Dealer Website:		

PRIMARY APPLICANT INFORMATION

Name of Applicant:	Title:	Ownership %:
Home Address:		How long? Rent <input type="checkbox"/> Own <input type="checkbox"/>
Email:	Phone:	Cell:
Driver License #:	Expires:	State:
Monthly Payment or Rent:	SSN:	Marital Status:

CO-APPLICANT INFORMATION

Name of Applicant:	Title:	Ownership %:
Home Address:		How Long? Rent <input type="checkbox"/> Own <input type="checkbox"/>
Email:	Phone:	Cell:
Driver License #:	Expires:	State:
Monthly Payment or Rent:	SSN:	Marital Status:

OTHER FLOORPLAN LENDERS

Company	Credit Limit	Current Balance

OTHER CREDIT INFORMATION

I the undersigned (1) make the above representations, which are certified correct, for the purpose to secure credit; (2) authorize Westlake Flooring Services to obtain credit reports and consumer reports on me periodically and to gather employment and business history as they consider necessary and appropriate; (3) obtain consumer credit reports and credit reports on me; (4) understand that Westlake Flooring Services will retain this application whether or not credit is approved, and that it is the applicant's responsibility to notify the creditor of any changes in name, ownership, address, or contact information. This application will be confidential and not shared with outside parties.

To comply with the USA Patriot Act, Westlake Flooring Services is required to verify the identity of members applying for and opening new accounts or services with our financial institution. Information we are require to obtain includes name, mailing and residence address, tax identification number or social security number, date of birth and a copy of a government issued photo ID. Additional information may also be gathered depending on the type of account applied for or opened. Identification and information on existing members will be gathered as they open or use additional services offered by Westlake Flooring Services. The Act requires us to maintain records of the identification verification and to periodically update this information. Confidentiality of the information gathered and used will be maintained as required under the Privacy Act.

Signature of Applicant	Date
Signature of Co-Owner	Date



Please Provide the below information for your Decision Logic request successfully transmitted.

Dealership Dealer Code:
Principal Name:
Principal Cell:
Principal email address:
Bank account and type: Checkings
Bank Name:

****Please return the completed form via email to leads@wfs-flooring.com or to your local flooring area manager**