

III. Owner contact information

Owners: Proprietors, Partners, Members or Stockholders having any financial interest. Information from each owner is required. Please attach pages if additional space is required.

1. Name: _____ Financial Interest: _____

Street Address: _____
Number & Street Name City State Zip

Mailing Address: _____
Number & Street Name City State Zip

Telephone: _____ Email: _____

2. Name: _____ Financial Interest: _____

Street Address: _____
Number & Street Name City State Zip

Mailing Address: _____
Number & Street Name City State Zip

Telephone: _____ Email: _____

Publicly Traded Company – Registered Agent (Individual to whom any legal notice may be delivered):

Agent Name: _____

Agent Address: _____
Number & Street Name City State Zip

Agent Phone Number: _____ Agent Fax Number: _____

IV. Attachments Required

1. Copy of current, valid state license pursuant to Chapter 393, Subchapter G of Texas Finance Code.
2. Copy of a current, valid Certificate of Occupancy issued under Section 15.02.103 of the City of Leon Valley Code of Ordinances.

I certify that I, the Applicant, to the best of my knowledge did truthfully and honestly present and provide the necessary documentation and licensing to the City of Leon Valley.

Signature of Applicant: _____

This Credit Access Business application is pursuant to and in compliance with Article 4.01 Section 4.01.006 Leon Valley Code of Ordinances.