



NEW CAPITAL INVESTMENTS, INC

434 S. Euclid St. Suite 152, Anaheim CA 92802

Agent Information

Agents Name _____ Date of Birth _____

License # _____

Desired e-mail address _____@newcapitalinvestments.com

Address _____

Telephone Numbers: Main: _____

Home _____

Cell _____

Fax _____

E-mail address _____

Credit Reports (www.fundingsuite.com)

Desired Login Name _____

(at least 8 characters)

Desired Password _____

(at least 8 characters, one must be a number)

Credit Card Information (Credit Reports will be billed to this card):

Name: _____

Card #: _____ Security Code #: _____

Billing Address: _____

Expiration Date: _____

Type of Card: _____

By signing below I agree that I have received, read and understand all of the terms and provisions found in the New Capital Investments Inc. Standard Operating Procedures Manual.

Agent Signature _____ Date _____

Please Fax or E-mail for to : (866)268-9189 OR hr@newcapitalinvestments.com

Tel. 714.277.4156¹ Fax 866.268.9189

www.newcapitalinvestments.com