

REQUEST TO FUND ORGANIZATION AZ MVD NOW ACCOUNT

This application is to be completed by the person legally authorized to act on behalf of the organization. By completing this form you understand that all company Representatives on the account will have access to handle monetary transitions placed on the account, including disbursement requests. You also understand unusual disbursement requests are subject to additional review. Send completed form to accountsupport@azdot.gov.

Company/Organization Name			
Physical/Business Address (Not a mailing address)	City	State	Zip Code
Organization's Administrator Name (Printed First and Last Name)	Driver License Numl please include copy of Di	Driver License Number (if not issued in AZ please include copy of DL)	
Email Address used to sign into the organization's AZMVDNow account			
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