

BUSINESS CONTACT INFORMATION								
Company name					Date busine	ess commenced		
Billing Address					☐ Sole pro	prietorship	☐ Partnership	
City, State ZIP					☐ Corpora	tion	☐ Other	
Primary Billing Contact Name					Owner Nan	ne:		
Billing E-mail					Owner Pho	ne Number:		
Billing Phone No.					Owner Ema	ail:		
Site Name:								
Site Address								
City, State ZIP								
Primary Contact								
Phone Number								
Email Address								
Check all that Apply: ☐ Gas Station ☐ C-Store ☐ Car Wash								
PAYMENT:	PAYMENT: CREDIT CARD E-CHECK							
Credit Card Type	□ AMEX [	□ VISA □ MC	□ Discover	Bank name:				
Credit Card Number				Bank Address				
Expiration Date:				City, State ZIP	Code			
CVV Code				Phone				
Billing Address City State Zip				Account numb	er			
Name on Card				Type of accour	nt	☐ Savings ☐ Ch	ecking D Other	
I agree to pay for products and/or services provided by IEC/CWT Services, and hereby authorize IEC/CWT Services to process my credit card for unpaid invoices after 30 days.  Signed:								
<u> </u>								
BUSINESS/TRADE REFERENCES								
Company name				Phone				
Address				Fax				
City, State ZIP Code				E-mail				

Other

Phone

E-mail

Other

Fax

Type of account

Company name

City, State ZIP Code

Type of account

Address

Company name	Ph	one						
Address	Fa	Fax						
City, State ZIP Code	E-r	E-mail						
Type of account	Ot	Other						
ACCOUNTS PAYABLE CONTACT								
Name:		Phone						
E-mail								
Card Authorization form. Providing of any past due balance.  Client agrees to reimburse IEC/CV Additionally, a 1% interest charge.  There is a 25% restocking charge,	ceipt. Invoices that are 30 days past on subsequent products or services, or Services for all charges, fees, and or \$35.00, whichever is greater, per plus shipping and handling, on all apaddress, City State Zip, Phone, Main Con	expenses, incurred in the colle month, will be added to delin	is contingent upon the absence ection of any past due balance.					
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By submitting this application, you authorize IEC/CWT Services to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES						
Signature		Signature				
Name and Title		Name and Title				
Date		Date				