

Credit Application Form



Bill to Company

Account Name _____

Address: _____

City: _____ State: _____ Zip _____

Country: _____

Business Phone #: () _____

Business Fax #: () _____

President / Owner: _____

Year Established: _____

Accounts Pay Manager: _____

Car Wash Location if different than bill to address _____

Address: _____

City: _____ State: _____ Zip _____

Country: _____

Business Phone #: () _____

Business Fax #: () _____

Bank References:

Bank Name _____

Address: _____

City: _____ State: _____ Zip _____

Bank Phone #: () _____

Bank Fax #: () _____

Checking Account #: _____

Contact: _____

I certify that all information in this application is true and correct. I agree to pay all invoices within ECONOCRAFT WORLDWIDE MFG., INC.'s terms. I hereby authorize all companies and financial institutions with whom we do business to release credit information to ECONOCRAFT WORLDWIDE MFG., INC.

Signature: _____

Trade References:

Name _____

Address: _____

City: _____ State: _____ Zip _____

Phone #: () _____

Fax #: () _____

Account #: _____

Contact: _____

Trade References:

Name _____

Address: _____

City: _____ State: _____ Zip _____

Phone #: () _____

Fax #: () _____

Account #: _____

Contact: _____

Trade References:

Name _____

Address: _____

City: _____ State: _____ Zip _____

Phone #: () _____

Fax #: () _____

Account #: _____

Contact: _____

- On all PAST DUE INVOICES a monthly interest rate of 1 1/2% will be charged.
- There is a \$25.00 service charge for all returned checks.

Date: . ____ / ____ / ____

(718) 585-6463 383 CONCORD AVENUE BRONX, NY 10454 FAX # (718) 585-0788

We reserve the right to make changes without any notice and without any obligations Regarding Prices and Products