



CUSTOMER INFORMATION CARD

Service Site Name _____
 Site Address _____
 City/St/Zip _____
 Owner's Name _____

Billing Company Name _____
 Billing Address _____
 City/St/Zip _____
 Existing Billing Customer Number _____

A/P Name _____
 A/P E-mail _____
 A/P Phone _____

Service Contact Name _____
 Service Contact Phone _____
 Service Contact E-mail _____

Are your purchases tax exempt? Y ___ N ___
 If yes, attach certificate for each state

Terms Applied For (choose one):

Net 30 _____
 Credit Card (keep on file) _____
 COD _____

Are Purchase Order numbers issued? Y ___ N ___

cc# _____
 cc expiration _____ Code _____

How should we send your invoice? Mail ___ E-mail _____

All information above this line must be completed for existing customers adding new sites

How long have you been in business? _____
 How did you hear about us? _____

TRADE REFERENCES (No Utilities or Credit Cards)

1.) Name _____
 Address _____
 City/St/Zip _____
 Contact Name _____
 Contact E-mail _____

2.) Name _____
 Address _____
 City/St/Zip _____
 Contact Name _____
 Contact E-mail _____

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (net 30) and agrees to pay a service charge per month of 2% per month (24% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Printed Name _____
 Signature _____

Title _____
 Date _____

Please e-mail form to jennl@getzfire.com or fax to (309) 673-8456

For Getz Office Use Only	
Service Schedule	Monthly ___ Annual ___
Getz Technician #	_____