

MAILING ADDRESS

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| | Credit Applic | cation |
|---------------------------|-------------------------|---------------------------|
| Date | | |
| | | |
| Description of Business _ | | |
| Address | | |
| City | State | Zip Code |
| Phone Number | Fax Number | |
| | <u>Contacts</u> | |
| Acct. Payable | Phone # | Fax # |
| Shop Contact | Phone # | Fax # |
| Shop Location | | |
| FED TAX I.D. #/S.S | Year Est.: | Years at Present Location |
| ARE PURCHASE ORDE | RS REQUIRED? | |
| PRINCIPAL | S: (Individual Owners O | R Corporation Officers) |
| Name | Title: _ | |
| Name | Title: _ | |
| Name | Title: _ | |
| | Bank Reference | e <u>es</u> |
| Name | | Phone # |
| Address | | |
| Name | | Phone # |
| Address | | |
| | | |
| Signatura | Drint | Titlo |