NEW CUSTOMER INFORMATION

Legal Name: _____

Service / Billing Information

Location Name	
Service Address	
City / St. / Zip	
Site Contact	
Phone	
Email	
See Attached Locations List	

	Same as Site Information
Bill To Address	
City / St. / Zip	
AP Contact	
Phone	
Email	

Work Order Information

PO Required   ___ Yes ___ No   **NTE Limit**   _____

NTE Increase / Quote Contact Information   Same as Site Information Above

Name _____   Phone _____

Email _____

Summary of Work Performed   ___ Same as Site Information Above

Email Address(es) _____, _____

Payment Terms: Payment is due upon completion of work and processing of invoice. Payment can be collected at the time of service or will be satisfied by the credit card on file after the completion of work and processing of invoice. All amounts unpaid within 30 days of the invoice date will be charged a service fee of 6% per month.

Printed Name _____   **Title** _____

Signature   _____   **Date** _____

TWC Services Account Rep. _____   **Date** _____

CREDIT APPLICATION

TWC SERVICES

Corporate Name: _____

Corporate Address: _____

_____

_____

Method of Invoice Delivery: **Mail**   **Email**   **Online**

Email Address: _____

Federal ID # _____   **D&B #** _____

Years Established _____   **# Years under current ownership** _____

Accounts Payable Contact Name: _____

Email Address: _____

Phone Number: _____

Payment Terms: *Payment is due upon receipt of invoice. All amounts not paid within 30 days of the invoice date are subject to a 6% service charge. Any accounts reaching 60 days past due are subject to collection proceedings. If Customer should fall behind these standard terms, TWC Services, Inc. reserves the right to deny services.*

Applicant's Certification Agreement and Authorization to Release Information: I hereby certify that the information in the credit application is correct. If failure to pay according to the terms of this Agreement causes our account to be assigned or referred to an attorney for collection, then we agree to pay all reasonable collection costs including attorney fees and court costs. Further, I authorize supplier references listed in this credit application to release the information necessary to assist TWC Services, Inc. in determining the amount and conditions of credit to be extended. We fully understand TWC Services, Inc. credit terms and agree to payment in consideration of extended credit.

Printed Name _____   **Title** _____

Signature _____   **Date** _____

TWC Services Account Rep. _____   **Date** _____