



Professional Contractors in Site Remediation,  
Decontamination and Waste Management

Email completed form to admin@awtenv.com

### **New Account Credit Application**

Customer Name: \_\_\_\_\_

Street: \_\_\_\_\_

Contact: \_\_\_\_\_

P.O. Box: \_\_\_\_\_

Phone #: \_\_\_\_\_

City, State: \_\_\_\_\_

Fax #: \_\_\_\_\_

Zip Code: \_\_\_\_\_

P.O. Required:    Yes    No

Federal ID #: \_\_\_\_\_

Tax Exempt:    Yes    No (Enclose Certificate)

Individual: \_\_\_\_\_

Partnership: \_\_\_\_\_

Corporation: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Years in Business: \_\_\_\_\_

Officers Name: \_\_\_\_\_

Title: \_\_\_\_\_

Officers Name: \_\_\_\_\_

Title: \_\_\_\_\_

Bank Reference: \_\_\_\_\_

Check Acct #: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone #: \_\_\_\_\_

City, State: \_\_\_\_\_

Fax #: \_\_\_\_\_

Trade Reference #1: \_\_\_\_\_

Phone #: \_\_\_\_\_

Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_

Address: \_\_\_\_\_

Trade Reference #2: \_\_\_\_\_

Phone #: \_\_\_\_\_

Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_

Address: \_\_\_\_\_

Trade Reference #3 \_\_\_\_\_

Phone #: \_\_\_\_\_

Contact: \_\_\_\_\_

Fax #: \_\_\_\_\_

Address: \_\_\_\_\_

I certify that all information on this form is correct. I understand your credit terms and agree to the proper payment in consideration of extended credit. AWT Environmental Services, Inc. reserves the right to access a 1 ½ monthly services charge on accounts having a balance past due. I have read and agree to abide with the Terms of Credit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

<b>OFFICE USE ONLY:</b>	Credit Limit:	Date:	CC: Theresa
Approved:	Requested By:	Project Value:	Set up File:
Salesman:	Terms:	Enter Access:	

P.O. Box 128  
Sayreville, NJ 08871  
(732) 613-1660  
Fax (732) 613-1536