

Charge Account Form

AHON									
NAME			FIRST NAME						
CELL PHONE			FAX						
		CITY		STATE	ZIP				
		CITY		STATE	ZIP				
			WORK PHON	E	HOW LONG?	1			
EMAIL ADDRESS			OTHER AUTHORIZED USERS?						
CES									
ROUTE SERVICE? (Route Pick-Up & Delivery on Monday & Thursday 8am to 5pm)						No			
Additional Preferences/Instuctions:									
CREDIT CARD INFORMATION (Required)									
AMEX	CARD NUMBER				EXP DATE				
AI	ADDRESS WHERE CREDIT CARD BILL IS SENT (INCLUDE ZIP CODE)								
the amount chuntil a valid care	arged to yo	our card. Ar		-					
		1 4 41							
e to pay all collection cation authorizes C statement date will the Peak to bill my/o	on or legal fee Cleaners At Th Il be assessed our credit card	es required to he Peak to ver d finance char d at the beginn	collect payment rify all informatio ges of 10% per uning of each mor	on delinquent and provided by a month.	accounts. applicant(s).	informa	ation		
rth above and unde	erstand this cr	redit agreeme	nt is subject to th	ne Federal Con	sumer Credit C	ollectio	n Act.		
Customer Signature:				Date					
	CES p & Delivery of the amount chuntil a valid car IONS Il responsibility for the to pay all collection authorizes of the total authorizes of the t	CES p & Delivery on Monday MATION (Requ AMEX ADDRESS WH a beginning of each monti the amount charged to yountil a valid card is provide I responsibility for all charges me to pay all collection or legal feed cation authorizes Cleaners At To statement date will be assessed the Peak to bill my/our credit card formation section of this agreement the above and understand this collections.	CES p & Delivery on Monday & Thursday MATION (Required) CARD NUMBER ADDRESS WHERE CREDIT a beginning of each month for the predicted amount charged to your card. Are antil a valid card is provided. I responsibility for all charges made to this accepto pay all collection or legal fees required to cation authorizes Cleaners At The Peak to verstatement date will be assessed finance charges repeated by the prediction of this agreement for said put the above and understand this credit agreement.	CELL PHONE CITY CITY WORK PHON OTHER AUTHORIZED USER CES P & Delivery on Monday & Thursday 8am to 5p MATION (Required) AMEX ADDRESS WHERE CREDIT CARD BILL IS 3 a beginning of each month for the previous month the amount charged to your card. An automatic featural a valid card is provided. In responsibility for all charges made to this account according to pay all collection or legal fees required to collect payment cation authorizes Cleaners At The Peak to verify all information statement date will be assessed finance charges of 10% per rule Peak to bill my/our credit card at the beginning of each montormation section of this agreement for said purpose. The above and understand this credit agreement is subject to the same control of the province of the period of t	CELL PHONE CITY STATE CITY STATE WORK PHONE OTHER AUTHORIZED USERS? CES p & Delivery on Monday & Thursday 8am to 5pm) MATION (Required) AMEX ADDRESS WHERE CREDIT CARD BILL IS SENT (INCLUE) a beginning of each month for the previous month's charges. the amount charged to your card. An automatic fee of \$10 wi until a valid card is provided. In responsibility for all charges made to this account according to instructions to pay all collection or legal fees required to collect payment on delinquent cardion authorizes Cleaners At The Peak to verify all information provided by a statement date will be assessed finance charges of 10% per month. The Peak to bill my/our credit card at the beginning of each month. I / We authormation section of this agreement for said purpose. 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CES P & Delivery on Monday & Thursday 8am to 5pm) Yes ADDRESS WHERE CREDIT CARD BILL IS SENT (INCLUDE ZIP CODE) be beginning of each month for the previous month's charges. A statement the amount charged to your card. An automatic fee of \$10 will be charged intil a valid card is provided. ONS Il responsibility for all charges made to this account according to instructions set forth above, to pay all collection or legal fees required to collect payment on delinquent accounts, cation authorizes Cleaners At The Peak to verify all information provided by applicant(s), statement date will be assessed finance charges of 10% per month. Le Peak to bill my/our credit card at the beginning of each month. I / We authorize use of the primation section of this agreement for said purpose. th above and understand this credit agreement is subject to the Federal Consumer Credit Consumer Credi	CELL PHONE CITY STATE ZIP WORK PHONE HOW LONG? OTHER AUTHORIZED USERS? CES p & Delivery on Monday & Thursday 8am to 5pm) Yes No No MATION (Required) AMEX CARD NUMBER ADDRESS WHERE CREDIT CARD BILL IS SENT (INCLUDE ZIP CODE) De beginning of each month for the previous month's charges. A statement will be the amount charged to your card. An automatic fee of \$10 will be charged for de until a valid card is provided. IONS Il responsibility for all charges made to this account according to instructions set forth above. De to pay all collection or legal fees required to collect payment on delinquent accounts. Pattern and the control of the previous month. If We authorize use of the information authorizes Cleaners At The Peak to verify all information provided by applicant(s). Statement date will be assessed finance charges of 10% per month. De Peak to bill my/our credit card at the beginning of each month. If We authorize use of the information month of this agreement for said purpose. The above and understand this credit agreement is subject to the Federal Consumer Credit Collection.		

23425 N Scottsdale Road Fax: (602) 485-0436 Phone: (480) 419-8778