

CUSTOMER INFORMATION AND PAYMENT PROGRAMS

Name: _____ **Date:** _____

Delivery Address: _____

Billing Address: _____

Ph# _____ **Alt#** _____ **Email:** _____
(Cell) (Work) (Required for electronic statements)

TYPE OF CONTRACT: Budget Pre-Buy 20% Lock-In

DELIVERY OPTIONS: Will Call Keep Fill

PAYMENT TYPE: ACH Credit Card Debit Card Cash on Delivery

ACH:

Bank Name: _____

Bank Routing Number: _____ **Account Number:** _____

Authorization Signature: _____

* Please be sure to send in a voided check along with this form.

* Transfer amount will be exactly the dollar amount printed on the delivery ticket, unless previously authorized to be different (i.e. Budget Plan)

Credit Card / Debit Card:

Credit Card Debit Card

Visa Master Card American Express Discover

Name On Card: _____

Billing Address: _____

Card Number: _____ **Expiration Date:** _____

Security Code (see back of card): _____

Authorization Signature: _____

* Charge amount will be exactly the dollar amount printed on the delivery ticket, unless previously authorized to be different (i.e. Budget Plan)