

SIGNATURE:

DATE:

## **PURCHASE APPLICATION FORM**

						CUS	TOMER I	NFOR	MATION					
*PURC	HASE TYPE	□ PURCHASE □ FINANCE												
*FIRST NAME (AS IN ID)								*LAST	NAME (AS IN I.D.)					
*SOCIAL SECURITY#			- [		<u> -                                    </u>			*DRIV	ER LICENSE NUMBER					
E-MAIL ADDRESS									O / BUSINESS TRATION NUMBER	(de				
*LEGAL ADDRESS /RESIDENCE		STREET							-			APT#		
		CITY								STATE		ZIP CODE		
HOME PHONE NO.		MOBILE PHONE NO.							LE PHONE NO.					
NAME OF SALES REP								REF PHON				SALES REP CODE		
INSTALLATION DETAILS														
SERVICE REQUEST DATE														
*FIRST NAME (AS IN ID)		*LAST NAME (AS IN I.D.)												
INSTALLATION ADDRESS (If different from the above current address)		STREET										APT #		
		CITY								STATE		ZIP CODE		
PHONE (HOME)		MOBILE										-		
OPTION		REFRIGERATOR CONNECTION (  YES   NO)						MEMBERSHIP □ YES □ NO						
REMARKS														
PRODUCTS DETAILS														
NO.	MODEL	QUANTITY		OR	RDER	ТҮРЕ	DURATIO	DN	DEPOSIT IF APPLICABLE	MONTHLY PAYMENT		TAX	TOTAL (USD)	
1														
2														
3														
									GRAND TOTAL (USD)					
PAYME	ENT METHOD	□ CASH □ CARD				□ CAR	D	□ CHECK □ AC		СН		□ CCR	□ SYN	
						AC	CEPTANC	E API	PROVAL					
· may · DYN source	providing the information furnish information about the control of	out me(even i inquires if it o plication, and	f app consi	olication iders ne purpose	n is de ecessa es of r	enied) to cr ry(includin reviewing, r	eate and update ig requesting rep naintaining or co	their recorts from	cords and to provide me in consumer reporting ag information.	with service gencies, fina	and spencial ser	ecial offers.		
purchas	plication and the agreem se or lease an item. DYN nd be 18 years or older to	IAQUA USA		-				-					·	
	(				SALES REPRESENTATIVE									

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