



NEW ACCOUNT FORM

60-88 Mount Olivet Crescent, Maspeth NY 11378

Telephone: (718)570-2571 Fax: (718)366-2729 Email: GianGem27@gmail.com

Date _____ Tax ID _____

Business Name _____

Bill to Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Fax Number _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

Name of Owner/Responsible Party _____

Secondary Contact _____

Type of Business _____

Car Wash__ Gas Station__ Convenience Store__ Wholesail/Retail__ Other__

How do you heard about us: GianGem's advertisement__ Referral__ Internet__ Other__

How long have you been in this business: _____

Preferred method of payment: Cash__ Check__ Credit Card__ Zelle__ Venmo__

If Paying by check please provide the following bank information

Bank name: _____ Branch Manager Name _____

Address _____

City: _____ State _____ Zip Code _____

Bank Phone _____ Checking Account #: _____

I, _____

Hereby authorize GianGem Enterprises. Inc to receive credit information of the above checking acc

Signature: _____

Print Name _____

Credit Terms: Applications for credit are available for your request.

