

CONVENIENCE SAVINGS APPLICATION FOR INDIVIDUAL CHARGE ACCOUNT

1133 Ellison Avenue • Louisville, KY 40204 • 502.637.8771 • 502.637.6234 FAX



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NAME (LAST, FIRST):						
CURRENT ADDRESS:				Apt. #:		
CITY:			STATE:	Zip:		
YEARS AT CURRE	nt Residence:		Rent/Own:			
Home Phone ()		Mobile	PHONE: ()		
Previous Addre	ESS:		Apt. #			
CITY:	CITY:			ZIP:		
EMAIL:				Social Security Number:		
CURRENT EMPLO	YER:		ADDRESS:			
Position			Work Phone: ()		
CREDIT CAF	RD INFOR	MAIION				
TYPE OF CREDIT C.	ARD: O VISA	OM	ASTER CARD			
NAME (AS ON CREE	DIT CARD):					
ACCOUNT NUME	BER:			EXPIRATION DATE:	CVV#:	
REFERENCE	S					
NAME:	Name:		Address:			
Phone Number:	:()		RELATION:			
SERVICE SPE	ECIFICAT	IONS				
				Instructions:		
Location for Delivery: SHIRTS		SPECIAI	LINSTRUCTIONS.			
TYPE OF STARCH:	O NO	O MEDIUM	O HEAVY			
PACKAGING:	O Hangers	O BOXED				
AGREEMEN						

This statement is submitted to obtain credit and I certify that all information herein is true and complete. I also authorize Parrot Cleaners to obtain further information concerning my credit. I will pay all statements within 30 days of date due. If my statement is not paid within 30 days from date due, I do hereby authorize Parrot Cleaners, Inc. to charge balance due against my credit card listed above. A service charge of 1 ½ % per month will be assessed on all unpaid invoices over 30 days past billing date. If this account is not paid when due, the undersigned promises to pay in addition all costs of collection and reasonable attorney's fees incurred by Parrot Cleaners on account of such collection, whether or not suit is filed hereon. I agree to all terms and conditions set forth above and understand this credit agreement is subject to the Federal Consumer Credit Collection Act and the Revised Code of Kentucky.

Signature: _____

Date:_____

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Updated: 3/5/08 Quality Dry Cleaning Since 1928 Application for Individual Charge Account