

Delivery Wow.

House Account Application

Company Name _____

Address _____

Zip Code _____ Phone Number _____ Fax _____

Billing Contact _____

Billing Address (If different than above) _____

Billing Phone Number _____

Email _____

Authorized Users with Phone Numbers _____

Do your invoices need? Matter Number _____ Job Code _____

Other Identifier _____

Would you like invoices emailed to one email address? _____ Address? _____

References:

Bank _____

Vendor 1 _____

Vendor 2 _____

Credit terms are Net 30. All invoices over 30 days are subject to 1.5% per month service fee (18% APR). Returned check fee is \$25. Statements of Account are mailed Semi-monthly for your review.

Signature of Officer or Authorized Person

Please fax to (312) 733-5029 Questions? Please call (312) 733-5019

Make Checks Payable to:

Tastefully Delivered LLC
DBA Delivery Wow
2602 S Wallace St
Chicago, IL 60616