



# Credit Application

Your Home Water Experts

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Do you own or rent?

Have you been at the above address less than 6 months?

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Employment: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_

### ***Aqua Systems Use Only:***

Salesperson: \_\_\_\_\_ Date: \_\_\_\_\_

Purchase                  Rent                  Route

Project:    AVN    COL    FSR    FTW    MO    GRN    LFT    MUN    RIC    INCOL    BEL    MAR

Release of Credit Information. The signing of this application authorizes Aqua Systems, LLC d/b/a Aqua Systems ("Aqua Systems") to perform credit investigation(s) of the Applicant. Applicant authorizes any references to release information necessary for Aqua Systems to make an informed credit decision. Aqua Systems is authorized to make all inquiries deemed necessary to determine the credit worthiness of Applicant including with any third parties with which the Applicant has or is conducting business and any additional third parties that Aqua Systems deems relevant. Aqua Systems is hereby authorized to answer questions about its credit experience with Applicant and to provide information regarding its credit experience with Applicant. If the undersigned individual is not the Applicant, but an authorized representative of Applicant, then the undersigned individual recognizes that his or her individual credit history may be a factor in the evaluation of the credit history of Applicant and hereby authorizes Aqua Systems to perform the necessary credit investigation and make all inquiries deemed necessary to determine the creditworthiness of the undersigned individual.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_