



314 North Pearl Street - Albany, New York 12207  
Phone (518) 434-4546 Fax (518) 434-0891

## New Account Opening Form

Return via email: [araes@adkenv.com](mailto:araes@adkenv.com)

Name of Business: \_\_\_\_\_

Principal Owner(s): \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Reporting Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

Accounting Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

Type of Business: Corporation: \_\_\_\_\_, Partnership: \_\_\_\_\_, Proprietorship: \_\_\_\_\_

How long has business been in operation? \_\_\_\_\_

Type of account are you requesting: \*Payment at time of service: \_\_\_\_\_, \*Credit Card on File: \_\_\_\_\_

\*If one of the above two are checked, page 2 is not needed.

Credit: \_\_\_\_\_, Credit Limit Desired: \_\_\_\_\_ (Additional fees may apply)

### Type of work:

Field Services: \_\_\_\_\_, SPDES: \_\_\_\_\_, Process Control: \_\_\_\_\_, Drinking/Waste Water: \_\_\_\_\_, Other: \_\_\_\_\_

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### For AES Internal Use:

Credit Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Acct# \_\_\_\_\_

Notes: \_\_\_\_\_



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**Bank Account Information:**

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

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

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

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

Acct #: \_\_\_\_\_

Acct #: \_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Contact: \_\_\_\_\_

Contact: \_\_\_\_\_

**Business References**

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

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

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

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

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

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

Contact: \_\_\_\_\_

Contact: \_\_\_\_\_

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

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

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

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

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

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

Contact: \_\_\_\_\_

Contact: \_\_\_\_\_

**Terms & Guarantee**

**(Please review before signing)**

I/we agree that the total amount is due and payable within thirty (30) days after receipt of invoice. If I/we fail to pay as agreed to the above terms, Adirondack Environmental Services, Inc. may declare the entire balance due and payable. I/we hereby certify that the information contained herein is true and is given to induce Adirondack Environmental Services, Inc. to extend credit to the above business. To further induce Adirondack Environmental Services, Inc. to extend credit to the above noted business, I/we also agree to become jointly and personally liable to Adirondack Environmental Services, Inc. for any balance due on the above business account. I/we agree to a Finance Charge on any past due balance computed on the previous month's ending balance of 3% per month, which corresponds to an ANNUAL PERCENTAGE RATE OF 18%. I/WE also understand that this is a Guarantee even if signed as an Officer of the Company. It is further understood and agreed that in the event any charges are not paid when due, that the applicant will pay all of Adirondack Environmental Services, Inc. cost of collection, reasonable attorney fees and court costs.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name, Title



**Experience is the solution**

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**CREDIT CARD BILLING AUTHORIZATION**

I hereby authorize Adirondack Environmental Services, Inc. to bill me directly via my credit card for services provided by them. This authorization shall remain valid unless or until Adirondack Environmental Services, Inc. is notified by me in writing.

**Authorization:**

Keep on File for all Projects:                      One Time Only\*:

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

Company Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ eMail: \_\_\_\_\_

Name of Person Arranging for Service: \_\_\_\_\_

**Credit Card:**

Master Card: \_\_\_\_\_ VISA: \_\_\_\_\_ American Express: \_\_\_\_\_

Name as it appears on Credit Card: \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_

**Send Payment receipts to:** \_\_\_\_\_

**Adirondack Environmental Services, Inc.**

Client ID Number: \_\_\_\_\_ \*One time only Project ID Number: \_\_\_\_\_

Invoice #: \_\_\_\_\_ Invoice Date: \_\_\_\_\_ Total Charge Amount: \_\_\_\_\_