



Ian Taylor <a href="mailto:iantaylorautomotive@gmail.com">iantaylorautomotive@gmail.com</a> PHONE 905-380-6509 Address: 13 Seapark Or. Unit 6 St.Catharines ON L2M 6S5, Canada	<b>NEW CUSTOMER PROFILE</b>
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**CUSTOMER NAME & DETAILS**

<b>BUSINESS NAME:</b>		<b>DATE:</b>	
<b>ADDRESS:</b>			
<b>CITY:</b>			
<b>PROV / STATE:</b>		<b>POSTAL CODE:</b>	
<b>PRIMARY CONTACT:</b>		<b>PHONE #</b>	
<b>EMAIL:</b>			

**CREDIT CARD DETAILS & BILLING ADDRESS**

<b>TYPE OF CARD:</b>	<b>CARD NUMBER</b>	<b>EXP:</b>	<b>CVV#</b>
<b>VISA:</b>			
<b>MASTERCARD:</b>			
<b>AMEX:</b>			
<b>CARD HOLDER NAME:</b>			

<b>CREDIT CARD BILLING ADDRESS SAME AS BUSINESS?</b>	YES	NO	<b>IF NOT-FILL IN BELOW</b>
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STREET ADDRESS:			
CITY:			
PROV/STATE:		POSTAL CODE :	
SEND COPIES TO PRIMARY CONTACT?	YES	NO	<b>IF NOT-FILL IN BELOW</b>

\*\*\* "All work to be authorized prior to fixing. Completed work for the week, will be paid every Friday with this CC number" \*\*\*\*

**Disclaimer and Signature**

*By signing this I agree to the 'Terms of Sale' and authorize **Taylor Automotive** to process payments to the above credit card for invoices related to contracted work or wholesale product orders. I understand and agree that they may store this information for ongoing invoice processing under the same 'Terms of Sale'. All invoices are billed out and processed on the same day as the work or order is complete.*

Please email completed forms to: [lantaylorautomotive@gmail.com](mailto:lantaylorautomotive@gmail.com)

Signature:		Date:	
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