

# NYC SUV ACCOUNT APPLICATION

PREFIX \_\_\_\_\_

FIRST NAME \_\_\_\_\_ M.I. \_\_\_\_\_ LAST NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ JOB TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

OFFICE/ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

## CREDIT CARD INFORMATION

**Visa MC Amex Diners Club Discover Other**

CC# \_\_\_\_\_ EXP. DATE \_\_\_\_\_ CVV CODE \_\_\_\_\_

BILLING ADDRESS (IF DIFFERENT FROM ABOVE)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

**APPLICANT'S SIG.** \_\_\_\_\_ **DATE** \_\_\_\_\_

I \_\_\_\_\_ hereby authorize **NYC SUV INC.** to charge my credit card for all services associated with my **NYC SUV** account. Please initial \_\_\_\_\_

Please mail application to P.O. Box 1404, White Plains NY, 10602 or fax to 914-831-5668.  
You can also apply online at **nycsuv.com** or by phone at **1 888 269 2788 ext. 3**

## FOR OFFICE USE ONLY

Application reviewed on \_\_\_\_\_ Approved/Declined by \_\_\_\_\_

NYC SUV REP. (Agent). \_\_\_\_\_ New NYC SUV Acct No. \_\_\_\_\_