

ExpressKEY® FLEET ACCOUNT APPLICATION

Date _____

Business Name _____

Contact Person _____

Address _____

City _____

Home Phone _____ Work Phone _____ Fax _____

Credit Card # (MC) (V) _____

*We only accept Master Card or Visa

Card Holder Signature _____

*Account holders must have a current credit card on file

Bill directly to credit card (YES) (NO)

Number of keys requested: _____

(\$3.00 set up charge per key)

For Office Use Only

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Key Holder: _____ Key # _____

Mail or Fax application to: **Classic Wash, LLC**
510 S. Nelson
Greenville, MI 48838
Phone: 616-225-9356
Fax: 815-346-3364