



TOTAL WATER TREATMENT SYSTEMS, INC

5002 World Dairy Drive

Madison, WI 53718

PHONE: 608-221-2236
SECURE FAX: 608-226-5286

Today's Date: _____

Name: _____

SSN: _____

Birthdate: _____

Co-Applicant's Name: _____

Co-Applicant's SSN: _____

Co-Applicant's Birthdate: _____

Co-Applicant's Work #: _____

Address: _____

City: _____ State: _____

ZIP Code: _____ Phone: _____

EMAIL: _____

For your convenience, Total Water Treatment Systems also has automatic payment options available to you.

Ask your representative for details.

If less than two years at present address, fill out below:

Previous Address: _____

City: _____ State: _____ Zip Code: _____

Employment Information:

Employer: _____ No. of Years: _____

Employer Address: _____ Phone: _____

City: _____ State: _____ ZIP Code: _____

Do you OWN or RENT? If renter, you must have landlord's permission for equipment installation.

Landlord's Name: _____ Phone: _____

I hereby authorize Total Water Treatment Systems to check my credit history.

Customer Signature: _____