



136 Morgan Avenue, Brooklyn, NY 11237  
PH: 800-656-0005 / FX: 800-909-6610

## BANK AUTHORIZATION FORM

I hereby authorize \_\_\_\_\_ to release the required information regarding my account # \_\_\_\_\_ for my company to Auto Club Oil & Chemical Corporation for the sole purpose of establishing credit with said company.

**X** \_\_\_\_\_  
(SIGNATURE & DATE)

**X** \_\_\_\_\_  
(SIGNATURE & DATE)

- New Account: Please have this signed and faxed back, authorizing the bank to release information regarding your account. Thank you, Credit Department.
- Please note that the signer of this bank authorization must be named as a signer on this account.