



RENEW

AUTOMOTIVE SERVICES

New Customer Information Form

* First Name _____

* Last Name _____

* Address 1 _____

* Address 2 _____

* City _____

* State _____

* Zip code _____

* Contact number _____

* Preferred Contact Method: _____

* Contact type (circle one): Cell Work Home

* Email: _____

* Business Name: _____

* Fax #: _____

* Spouse Name: _____

* Spouse Contact Number: _____

* Spouse Contact Type (circle one): Cell Work Home

* Preferred Contact Method: Cell Work Home

Due to the 2019-2020 outbreak of the novel Coronavirus (Covid-19), our business is taking extra precautions with the care of every customer to include enhanced sanitation/disinfectant procedures in compliance with CDC guidelines. This business is not liable for any customer contract