

*County Cab/Yellow Cab*

9930 Meeks Boulevard, St. Louis, MO 63132-1484  
Office: (314) 991-5544 ♦ To order a cab: (314) 993-TAXI (8294)

Business Application for Credit

Firm Name \_\_\_\_\_ Main Phone \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Billing Contact Name \_\_\_\_\_

Billing Contact Phone Number \_\_\_\_\_

Billing Contact Email Address \_\_\_\_\_

Is Business: Individually Owned \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

Type of Business \_\_\_\_\_

How long in business \_\_\_\_\_

Trade References

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Key Contact \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Key Contact \_\_\_\_\_

Bank References

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Key Contact \_\_\_\_\_

Account Number \_\_\_\_\_ Type of account \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Key Contact \_\_\_\_\_

Account Number \_\_\_\_\_ Type of account \_\_\_\_\_

If the above firm extends credit to the applicant on the base of the stated information which applicant warrants to be true, applicant (his/her spouse and/or guarantor, if any) promises to pay the account (including both present and future liabilities) in full ten (10) days after billing. If applicant should fail to pay within twenty five (25) days after billing, the applicant agrees to pay a service charge of 1½% per month on the unpaid balance of said account, any accrued service charges and interest at the maximum legal rate from the due date through date paid in full, plus court costs, collection fees and attorney's fees. If the account is paid via check and the check is returned for insufficient funds, there will be a \$15 fee assessed to the account. County Cab/Yellow Cab is not responsible for the fraudulent use of the account. Failure to enroll in our safeguard policy or adhere to the safeguard policy will place your account at risk for fraudulent activity of which County Cab/Yellow Cab has no responsibility.

**Please mail to above address or fax to (314)991-4811.**

Signature \_\_\_\_\_

Title \_\_\_\_\_