



== Nanaimo ==

1005 Farquhar Street, Nanaimo, B.C., V9R 2G2

Phone 250-751-1111

Please Print Clearly and Provide all Information Requested.

PLEASE TELL US ABOUT YOURSELF		YOUR EMPLOYMENT INFORMATION	
/ <input type="checkbox"/> MR <input type="checkbox"/> <input type="checkbox"/> MRS <input type="checkbox"/> <input type="checkbox"/> MISS <input type="checkbox"/> <input type="checkbox"/> MS		SELF EMPLOYED? <input type="checkbox"/> <input type="checkbox"/> YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> RETIRED	
FIRST NAME	INITIAL	EMPLOYER'S/BUSINESS NAME	
LAST NAME		POSITION/OCCUPATION	
ADDRESS	APT. NO.	BUSINESS TELEPHONE (     )	EXT.
CITY	PROVINCE	LENGTH OF TIME AT PRESENT JOB	
POSTAL CODE		YOUR FINANCIAL INFORMATION	
HOME TELEPHONE (     )		BANK NAME	<input type="checkbox"/> <input type="checkbox"/> SAVINGS <input type="checkbox"/> <input type="checkbox"/> CHEQUING
DATE OF BIRTH (MM/DD/YY)		AGE	/     /
LOCATION/BRANCH		* CREDIT CARD NO.	
SIN NUMBER		EXPIRY DATE	
IF ADDRESS LESS THAN ONE YEAR, PLEASE SHOW FORMER ADDRESS		HAVE YOU DECLARED PERSONAL BANKRUPTCY IN THE PAST SEVEN YEARS?	
ADDRESS		APT. NO.	
/ <input type="checkbox"/> <input type="checkbox"/> YES <input type="checkbox"/> <input type="checkbox"/> NO			
CITY	PROVINCE	(IF YES WE WILL NOT BE ABLE TO APPROVE YOUR APPLICATION.)	
/ <input type="checkbox"/> <input type="checkbox"/> SINGLE <input type="checkbox"/> <input type="checkbox"/> MARRIED <input type="checkbox"/> <input type="checkbox"/> WIDOWED <input type="checkbox"/> <input type="checkbox"/> DIVORCED		I WILL USE THIS CHARGE CARD FOR MY: <input type="checkbox"/> <input type="checkbox"/> SELF <input type="checkbox"/> <input type="checkbox"/> FAMILY <input type="checkbox"/> <input type="checkbox"/> OTHER	
SPOUSE'S NAME		TOTAL NUMBER OF CARDS DESIRED <input type="checkbox"/> <input type="checkbox"/>	
/ <input type="checkbox"/> <input type="checkbox"/> OWN YOUR HOME <input type="checkbox"/> <input type="checkbox"/> RENT <input type="checkbox"/> <input type="checkbox"/> LIVE WITH PARENTS		PLEASE KEEP A LIST OF CARD(S) ISSUED TO YOU.	

By signing below, I consent to Yellow Cab Company obtaining credit and other information about myself at any time from any source. Yellow Cab Company may disclose any of this information at any time to any credit bureau or credit reporting agencies, any person who has or may have financial dealings with myself, any person with whom I propose to have any financial dealings and any lenders, in connection with any relationships between us or those which you or I may wish to establish.

I have read the terms and conditions and agree to be bound by them.

Signature of Applicant

Date (MM/DD/YY)

Signature of User's

\*Please note: All accounts outstanding 30 days after billing will be charged to your credit card.



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BUSINESS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ POSITION \_\_\_\_\_ TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

BILLING ADDRESS (IF NOT THE SAME AS ABOVE)

\_\_\_\_\_  
\_\_\_\_\_

CREDIT REFERENCES:

COMPANY NAME CONTACT PERSON TELEPHONE

1. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

2. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

3. \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

YELLOW CAB COMPANY IS PLEASED TO OFFER FOUR TYPES OF ACCOUNTS. PLEASE SELECT THE ACCOUNT THAT BEST SUITS YOUR NEEDS.

Charge Card Required Account. With this type of account, a charge card must be presented by the passenger in order to charge a trip to the account.  Total number of charge cards required.

Voucher Required Account. With this type of account, your company voucher will be required from the passenger in order to charge a trip to the account.

Imprinted Sale Slip Required Account. With this type of account, Yellow Cab Company will supply free of charge a charge card and sale slips. Your company needs to have an imprinter available or Yellow Cab Company can supply one for \$37.45 (taxes included).

By signing below, I consent to Yellow Cab company obtaining credit and other information on the above company at any time from any source. Yellow Cab Company may disclose any of this information at any time to any credit bureau or credit reporting agencies, any company has or may have financial dealings with the above company.

I have read the terms and conditions and agree to be bound by them.

Authorized Employee

Signature

Date(MM/DD/YY)

\_\_\_\_\_