

Corporate Account

ACCOUNT NUMBER



Blue Ribbon Taxi Association
 4020 W. Glenlake Ave.
 Chicago, IL 60646
 Phone: (773) 279-4100
 info@blueribbontaxi.com

Company:

Division:

Address:

City, State, Zip:

Main Contact:

Accounts Payable Contact:

Telephone:

Ext.:

Fax:

E-Mail:

Type of Business
(Partnership, Corp.):

Years in Business:

Partners or Corporate Officers

Name	Address	Telephone

Bank References

Bank Name	Address	Contact Name & Phone

Trade References

Company	Contact	Phone	Credit History

I certify that the above information is true. This information is to be used only for opening an account. The Customer agrees to pay all invoices within 30 days from date of invoice, and to pay 2% per month on all overdue balances.

Signature: _____ Title: _____ Date: _____