

Acrobat

outsourcing

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Title:

Company name/DBA: *Burlingame Country Club*

Phone: *650-696-8100* Fax: *650-347-3572* E-mail:

Registered company address: *80 New Place Road*

City: *Hillsborough*

State: *Ca*

ZIP Code: *94010*

Date business commenced: *Sept 1893*

Sole proprietorship:

Partnership:

Corporation: *X*

Other:

BUSINESS AND CREDIT INFORMATION

Primary business address: *same as above*

City:

State:

ZIP Code:

How long at current address?

Telephone:

Fax:

E-mail:

Bank name:

Bank address:

Phone:

City:

State:

ZIP Code:

Type of account

Account number

Savings

Checking

Other

BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Acrobat Outsourcing to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Title: *Controller / Asst Treasurer*

Date: *June 28, 2018*

Title:

Date: