



Elevating the Passenger Experience

# Credit Application

In order to establish an account with Tapis, please complete the credit information below and fax this form to 914-273-2875, Attn: John/Accounting. Thank you for your cooperation.

### Name/Address

|                   |        |          |
|-------------------|--------|----------|
| Last:             | First: | Title:   |
| Name of Business: |        | Tax ID#: |
| Address:          |        |          |
| City:             | State: | Zip:     |
| Phone:            | Fax:   |          |

### Company Information

|  |                    |                    |                       |
|--|--------------------|--------------------|-----------------------|
| Type of Business:  | In business since: |                    |                       |
| Legal form under which business operates:                        | <u>Corporation</u> | <u>Partnership</u> | <u>Proprietorship</u> |
| If division/subsidiary, name of parent company:                  | In business since: |                    |                       |
| Name of company principal responsible for business transactions: | Title:             |                    |                       |
| City:  | State:             | Zip:               |                       |

### Bank References

|                    |                   |                             |
|--------------------|-------------------|-----------------------------|
| Institution Name:  | Institution Name: | Institution Name:           |
| Checking Account#: | Savings Account#: | Home Equity Loan #/balance: |
| Address:           | Address:          | Address:                    |
| Phone/Fax:         | Phone/Fax:        | Phone/Fax:                  |

### Trade References

|                       |                       |                       |
|-----------------------|-----------------------|-----------------------|
| Company Name:         | Company Name:         | Company Name:         |
| Contact Name:         | Contact Name:         | Contact Name:         |
| Email:                | Email:                | Email:                |
| Address:              | Address:              | Address:              |
| Phone/Fax:            | Phone/Fax:            | Phone/Fax:            |
| Account opened since: | Account opened since: | Account opened since: |
| Credit limit:         | Credit limit:         | Credit limit:         |
| Current balance:      | Current balance:      | Current balance:      |

I hereby certify that the information contained herein is complete and accurate. I understand that this information will be used to determine the amount and conditions of the credit to be extended. I also hereby authorize the financial institutions listed in this credit application to release necessary information to Tapis Corporation in order to verify the information contained herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date