

CORPORATE APPLICATION

Fax to 678-278-8018

Business Information:

Name of Business _____ Years in Business _____

Business Email Address _____

Address _____ Suite# _____

City _____ State _____ Zip _____

AUTHORIZED USERS:

Name/Title _____

Telephone Number _____ Extension _____

Name/Title _____

Telephone Number _____ Extension _____

Bank Reference/Credit Card Authorization:

Bank Name _____

Address _____

City _____ State _____ Zip _____

Business Account # _____ Routing Number # _____

Credit Card Type _____ Account Number _____

Account Name _____

Expiration Date _____ Security Code (CVV) _____

I certify that the above information is complete and accurate. I agree to be bound by the terms & conditions herein and will notify Restaurant RoadRunner of any changes to the above information, any additions, or termination of authorized users. I hereby authorize the above named person(s) and company to charge on

Restaurant RoadRunner's business account. The above named person and company is responsible for all charges incurred. I hereby authorize the bank references listed to accept copies of application and to release credit or financial information on accounts. I agree to allow Restaurant RoadRunner to use the information provided to conduct a credit check and to be bound by terms of credit. Upon credit approval an account # will be issued. All orders on account will include 10% gratuity for the mobile waiter. I agree to pay for all purchases charged to the account. I agree to be responsible for any outstanding balance and any new charges by authorized users.

Signature (Required)

Title (Required)

