

# BAY STATE TAXI

65 William St. Suite 300  
Wellesley Hills, MA 02481  
Tel: 781-235-2862 Fax: 781-235-3198  
<http://www.baystatetaxi.com>

## CHARGE ACCOUNT APPLICATION

Please print and fill out this application then send or fax to us (see below for details).

Please check type of account you are applying for: Business  Personal

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Tel # \_\_\_\_\_

Tel# \_\_\_\_\_ Fax# \_\_\_\_\_

Email: \_\_\_\_\_

Person(s) authorized to order rides: \_\_\_\_\_

For your convenience, you will be billed monthly (net 30 days). You may remit payment by check within 30 days otherwise we will bill your credit card. Payments made after 30 days may be subject to finance charges or late fees.

### Credit Card Information:

\_\_\_\_\_ Card Name \_\_\_\_\_ Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

\_\_\_\_\_ Card holder name (as it appears on card)

I authorize Bay State Taxi to use this credit card for services rendered. Also by signing the application, I agree to assume all responsibility for the payment of all charges whether the issued coupons/vouchers are lost or stolen.

\_\_\_\_\_ Billing Address: \_\_\_\_\_

Authorized Signature

\_\_\_\_\_ Title

\_\_\_\_\_ Printed name

Please fax or mail this completed application to:

**Bay State Taxi**  
65 William St. Suite 300  
Attn: Personal Accounts  
Wellesley Hills, MA 02481

Or FAX completed application to **617-730-8424**