



Yellow Cab Company Ltd.

1441 Clark Drive, Vancouver, B.C. V5L 3K9
 Admin. Office: 258-4700 Fax: 258-4717 Taxi Line: 681-1111

Please Print Clearly and Provide all Information Requested.

PLEASE TELL US ABOUT YOURSELF		YOUR EMPLOYMENT INFORMATION	
[] MR [] MRS [] MISS [] MS		SELF EMPLOYED? [] YES [] NO [] RETIRED	
FIRST NAME	INITIAL	EMPLOYER'S/BUSINESS NAME	
LAST NAME		POSITION/OCCUPATION	
ADDRESS	APT. NO.	BUSINESS TELEPHONE () EXT.	
CITY	PROVINCE	LENGTH OF TIME AT PRESENT JOB	
POSTAL CODE		YOUR FINANCIAL INFORMATION	
HOME TELEPHONE ()		BANK NAME [] SAVINGS [] CHEQUING	
DATE OF BIRTH (MM/DD/YY) AGE []		LOCATION/BRANCH	
SIN NUMBER		* CREDIT CARD NO. EXPIRY DATE	
IF ADDRESS LESS THAN ONE YEAR, PLEASE SHOW FORMER ADDRESS		HAVE YOU DECLARED PERSONAL BANKRUPTCY IN THE PAST SEVEN YEARS?	
ADDRESS APT. NO.		[] YES [] NO	
CITY PROVINCE		(IF YES WE WILL NOT BE ABLE TO APPROVE YOUR APPLICATION.)	
[] SINGLE [] MARRIED [] WIDOWED [] DIVORCED		I WILL USE THIS CHARGE CARD FOR MY: [] SELF [] FAMILY [] OTHER	
SPOUSE'S NAME		TOTAL NUMBER OF CARDS DESIRED []	
[] OWN YOUR HOME [] RENT [] LIVE WITH PARENTS		PLEASE KEEP A LIST OF CARD(S) ISSUED TO YOU.	

By signing below, I consent to Yellow Cab Company obtaining credit and other information about myself at any time from any source. Yellow Cab Company may disclose any of this information at any time to any credit bureau or credit reporting agencies, any person who has or may have financial dealings with myself, any person with whom I propose to have any financial dealings and any lenders, in connection with any relationships between us or those which you or I may wish to establish.

I have read the terms and conditions and agree to be bound by them.

Signature of Applicant

Date (MM/DD/YY)

Signature of User's

*Please note: All accounts outstanding 30 days after billing will be charged to your credit card.