

**Pitt Stop Credit Card Application**

Bob Brandi Stations, Inc.      Phone: 803.957.7367  
 279 Cedarcrest Drive          Fax: 803.957.1581  
 Lexington, SC 29072          www.brandicompanies.com



**Account Information**

<b>Business Name</b>		<b>Federal Id#</b>	
<b>Address</b>		<b>Telephone Number</b>	
<b>Billing Address</b>		<b>Fax Number</b>	
<b>Primary Contact Name</b>		<b>Business Type</b>	
<b>Estimated Usage per Month</b>		<input type="checkbox"/> Sole-Proprietor <input type="checkbox"/> Non-Profit <input type="checkbox"/> Partnership <input type="checkbox"/> Government <input type="checkbox"/> Corporation	
<b>Business Description</b>	<b>Years in Business</b>		

**Proprietorships**      - Include name, residential address, title, and social security numbers of proprietors or partners  
**Corporations**          - Include name, residential address, title, and social security numbers of officers

Name	Title	Social Security #	Address

**Credit References**

Company	Address	Telephone#	Fax#

**Bank Information**

<b>Bank Name</b>	<b>Officer Familiar with Business</b>	<b>Telephone Number</b>
		<b>Fax Number</b>
<b>Address</b>		<b>Account Number</b>

I request a Pitt Stop credit card be issued upon approval of this application, and for this purpose, I agree to authorize a credit authorization. I understand credit shall be subject to continuing approval. I certify that I am authorized to make this request on behalf of this company, and it is agreed that all purchases will be paid in accordance with the terms and conditions of the Agreement that I will receive with the cards. the acceptance, signing or use of the cards will constitute acceptance of those terms and conditions.

<b>Authorized By (Please Print Name and Title)</b>	<b>Signature</b>	<b>Date</b>
	X	