**APPLICATION REQUEST FOR CREDIT TO PURCHASE BUS PASSES**

**Instructions:** Please fully complete the form, print, sign, and mail a copy to RTS Customer Service at 1372 East Main Street, Rochester, NY 14607 or upload the completed and the scanned .pdf document online at [myRTS.com/contact-us](http://rts.force.com/RTSContactUs). Please allow 2 to 3 weeks to process the application. Thank you! Questions? Please contact us at 585-288-1700.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | ACCOUNT STATUS:  NEW  RENEWAL | | | |
| BUSINESS NAME | | | LEGAL NAME | | | |
| BUSINESS ADDRESS | | | TELEPHONE | | | |
| BUSINESS OWNER | | | TITLE | | | |
| TYPE OF BUSINESS | | | HOW LONG IN BUSINESS AT THIS LOCATION | | | |
| FEDERAL ID # | | | DUNN & BRADSTREET # | | | |
| PLEASE ATTACH: | ANNUAL REPORT | | BANK STATEMENTS | | TAX RETURNS | |
| IF NO ANNUAL REPORT AVAILABLE PROVIDE: | | CURRENT ASSETS  $ | | CURRENT LIABILITIES  $ | | CASH ON HAND  $ |

**REFERENCES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **BANK** | **TRADE** | | | |
| YOUR BANK’S NAME | COMPANY NAME | | COMPANY NAME | |
| BANK ADDRESS | ADDRESS | | ADDRESS | |
| TELEPHONE | BUSINESS RELATIONSHIP | | BUSINESS RELATIONSHIP | |
| NAME OF CONTACT PERSON | NAME OF CONTACT PERSON | | NAME OF CONTACT PERSON | |
| ACCOUNT # | TELEPHONE | FAX | TELEPHONE | FAX |
| ACCOUNT TYPE | **OFFICE USE ONLY** | | **OFFICE USE ONLY** | |
|  | VERIFIED BY | DATE | VERIFIED BY | DATE |

Everything that I have stated in this *Request for Credit* is correct and to the best of my knowledge. I understand that RTS will retain this application whether or not It is approved. RTS is authorized to check my credit history.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| APPLICANT’S SIGNATURE |  | SOCIAL SECURITY # |  | DATE OF APPLICATION |  | DATE OF BIRTH |