



Corporate Account Form

Please fill in the following:

Company Name	
- _____	
(Main) Contact Name	Billing Address
- _____	Street - _____
(Accounts Payable) Contact Name	City - _____
- _____	
Fax Number	
(____) _____	Province - _____
(Main) Phone Number	(Main) Email Address
(____) _____	- _____
(Accounts Payable) Phone Number	(Accounts Payable) Email Address
(____) _____	- _____

Office use only: Account Auth. _____ Date: _____ Account # _____



Account Options

Invoicing Types (select an option)

Option 1 (Basic Invoicing) (Administration Fee 5%) → ☐

- You will receive an invoice emailed to the Accounts Payable E-mail you provided.

Option 2 (Detailed Invoicing) (Administration Fee 10%) → ☐

- You will receive an invoice & detailed trip list emailed to the Accounts Payable E-mail you have provided.

The detailed trip list (for every completed trip during that month) will have the following: Date & Time, Pick-up Location, Drop-off Location and Trip Total.

***Added Option* (Additional Information)** → ☐

You have the option to add in another column with any of the following: Reference #, Claim #, Booked by (and your staff members names), Clients name, etc. If selecting this added option, please add the required information on the [Parameters page](#).

Payment Options

Payment Options (select an option)

(Please refer to the Terms & Conditions page of this Application for more details)

Option 1 (Cheque) → ☐

(Please make all cheques payable to "[Soo Yellow Cab](#)")

Option 2 (Direct Deposit) → ☐

(If selecting this, please send the "E.F.T." paperwork to sooyellowcab@gmail.com)

Option 3 (Credit Card) → ☐

(Please fill in the "[Credit Card Form](#)" attached)

By choosing this option, you will be authorizing/allowing Soo Yellow Cab to manually charge the amount owing to Soo Yellow Cab directly from your credit card. If payment doesn't go through for any reason, your account with Soo Yellow Cab may be suspended. It will be the applicant's responsibility to update Soo Yellow Cab with new credit card information.

Option 4 (E-Transfer) → ☐

(Please send all e-transfers to "sooyellowcab@gmail.com")



Terms & Conditions

I **"New/Existing Applicant"** agree to the following terms and conditions:

1. Applicant certifies that all the information in this Application is true and correct.
2. Applicant agrees that unless otherwise mentioned in "Account Parameters", the applicant is responsible for all charges on the Applicant's account with Soo Yellow Cab.
3. Applicant agrees that payment is due no later than 30 days from the invoiced date.
4. Applicant understands that the account will be labeled as "Overdue" when an invoice is outstanding 30 days pasted the invoiced date.
5. When an applicant's account is labeled as "Overdue", a "Late Charge" of 2% compounded monthly will be added to the outstanding balance.
6. The Applicant must pay any and all costs of collection (including without limitation reasonable attorney's fees) incurred by Soo Yellow Cab in collecting any "Overdue Accounts".
7. All accounts must be paid in full.
8. All charges incurred are the sole responsibility of the account holder/applicant.
9. Applicant will review the invoice and notify Soo Yellow Cab at (sooyellowcab.rob@gmail.com) with any concerns or discrepancies no later than 7 days prior to the due date.
10. If Applicant is paying by a major credit card, the Applicant authorizes Soo Yellow Cab to process a manual (card not present) transaction. The signature located on the "Credit Card Form" constitutes acceptance of processing a manual (card not present) transaction.
11. This application is a contract and by submitting this agreement, the client acknowledges that the "terms and conditions" will be complied with.

Signature: _____ **Date:** _____

Office use only: Account Auth. _____ Date: _____ Account # _____



Credit Card Form

Please fill out the following information, ONLY if you have selected Option 3 "Credit Card" as your option of payment.

Name on Credit Card	Credit Card Number
- _____	- _____
Credit Card Expiry	Security Number
- ____ / ____	- _____
Signature	
- _____	

Once you have completed the application form simply use whatever option best suits you below.

By Mail

Soo Yellow Cab
89 White Oak Drive East
Sault Ste. Marie, Ontario
P6B-4J7

By Fax

705-942-0004

By Email

sooyellowcab.rob@gmail.com

Office use only: Account Auth. _____ Date: _____ Account # _____