

FOR OFFICE USE ONLY

Account: _____

Date opened: _____

Approved by: _____



PLEASE FAX BACK TO: 0121 426 0102

a) Business Name and Address:

b) Name and position of person requesting Account facilities:

_____ Purchase Order no: _____

c) Telephone No: _____ Extension: _____ Fax No: _____

d) Name, address and telephone numbers of two business references:

(1) _____

(2) _____

**e) Name of persons authorised to book taxis, or a password of your choice
(up to 16 characters only per person):**

f) Name and address to whom the invoice should be sent:

I have read the terms and conditions attached and fully understand them:

Signed: _____ Date: _____

TOA Taxis (Radio System) Ltd, 100 Vivian Road, Harborne, Birmingham B17 0DJ
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Registered No. 17798R