

Corporate Check Acceptance Application / Golden Triangle Mall

Please fax this form to **(940) 382-1990**

A Feldman Mall representative will contact you within 2 business days

Date: _____

Company Name: _____

Type of company: _____ # of employees: _____ Year established: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax#: _____

Authorized Person(s) to place orders: _____ Authorized Person(s) to pick up orders: _____

Controller Name: _____

Controller Phone #: _____

FOR VERIFICATION PURPOSES

Bank Name: _____

Bank Contact name: _____

Phone #: _____ Fax#: _____

Account #: _____

Disclaimer: I confirm the above information is accurate. In the event that my check is returned for whatever reason, I agree to pay Feldman Mall Properties in the form of cash, electronic bank transfer or credit card the amount due plus a bounced check fee of \$25. Cashiers Checks not accepted. Furthermore, I understand that I will not be able to submit a corporate check on behalf of my corporation in the future.

Print Name: _____

Signature of Applicant: _____ Date: _____

OFFICIAL USE ONLY:

Phone information verified by Controller at Requested Company: _____

Date of phone verification: _____

Name of person at company if different from Controller: _____

Company check acceptance: Approved / Declined

Review completed by: _____

Added to Corporate Accounts list: yes /no by _____