



200 East 10<sup>th</sup> Street  
New York, NY 10003  
Phone: 1-888-274-3154  
Fax: 1-800-289-8571  
[www.gotostreetsmart.com](http://www.gotostreetsmart.com)

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### CORPORATE ACCOUNT APPLICATION

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Company Name:

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Address:

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Tel #:

Fax #:

Industry:

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Accts Payable Contact:

Tel #:

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**References:**

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Name 1:

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Address:

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Tel #:

E-mail:

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Name 2:

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Address:

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Tel #:

E-mail:

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I the undersigned, hereby apply to open an account with STREET SMART. I understand that by signing below I am liable under the terms of this account. Payment for services rendered is billed bi-weekly from the beginning of each month, and is due within fifteen (15) days upon receipt of invoice. If we receive a late payment, it may force us to require C.O.D. payment on any further work, thereafter. Please make all checks payable to: STREET SMART.

Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_