



Pass Seller Credit Application – Banking Information
Bank Notification

Customer Information	
Contact Name:	
Business Name:	
Business Address:	
City:	State: Zip:
Accounts Payable Contact:	Phone Number:
Banking Account Information	
Business Account Bank Name:	
Bank Address:	
Bank Phone Number:	
Bank Account Number:	
Applicant authorizes and provides permission for the release of information concerning the above referenced bank account status to Orange County Transportation Authority.	
Release Authorization Signature: _____	
Printed Name: _____ Date: _____	
For Bank Use Only: Please complete the following information	
Date Account Opened:	
Average Balance:	
Is Account Status Satisfactory?	
Bank Representative Signature:	
Bank Representative Title:	
Date:	
Please return to:	Orange County Transportation Authority Accounting Department Attention Bus Pass Sales P.O. Box 14184 Orange, CA 92863-1584 FAX – 714.560.5793