

**Internal Combustion Engine Vehicle Permit
Application for Charge Credit
From the Village of Bald Head Island**

Name of Company or Individual: _____

Mailing Address: _____ Phone: _____

City Address: _____ State: _____ Zip: _____

Name of Person Making Application: _____

Type of Business: _____ NC License #(s): _____

Please list complete information on a bank reference and two (2) business references. Complete and mail a credit reference request form to each listed reference. Note: Credit approval can be processed only when completed application and at least three (3) references have been received.

- 1) Bank Reference _____ Address _____
City _____ State _____ Zip _____ Phone: _____
Fax Number: _____ Account Number: _____
Checking _____ Savings _____ Loan _____
Contact Person _____
- 2) Business Reference _____ Address _____
City _____ State _____ Zip _____ Phone: _____
Fax Number: _____ Account Number: _____
Contact Person _____
- 3) Business Reference _____ Address _____
City _____ State _____ Zip _____ Phone: _____
Fax Number: _____ Account Number: _____
Contact Person _____

I hereby authorize my bank and business references to release to the Village of Bald Head Island my credit records. (Please initial _____)

Upon approval of charge account, the contractor agrees to pay invoices for internal combustion engine vehicle permits received the previous month within fifteen (15) days of the date of invoice. No new permits will be issued until accounts are current. Abuse of the charge privilege will result in the cancellation of the account.

I certify that all the information on this form is correct and that I fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Signature

Date

The undersigned will be authorized to phone for permits provided they furnished my assigned account number: Please initial _____

- a) Name: _____
- b) Name: _____
- c) Name: _____
- d) Name: _____

Upon approval of your account, a letter will be mailed to assign your account number and to list information. You may make changes to the account information by submitting a written, signed statement about the change(s) you request (particularly critical when authorized charge changes).

Please return completed application to the following address:

**Village of Bald Head Island
P.O. Box 3009
Bald Head Island, NC 28461
Attention: Finance Director**