



Business America Services

ACCOUNT OPENING WORKSHEET

MAIL FORWARDING

NAME: _____

PRESENT HOME ADDRESS: _____

CITY: _____ STATE/ PROV.: _____

ZIP/ POSTAL CODE: _____

HOME TELEPHONE: _____ BUSINESS TELEPHONE: _____

EMAIL ADDRESS: _____ FAX NUMBER: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

DRIVER'S LICENSE#: _____ STATE EXP. DATE: _____

ADDRESS TO WHICH MAIL IS TO BE FORWARDED

NAME: _____

ADDRESS: _____ CITY: _____

STATE/ PROV.: _____ ZIP/ POSTAL CODE: _____

DATE SERVICE TO START: _____

FORWARDING SERVICE

- ONCE A WEEK VIA US MAIL **** PLEASE CHECK ONE**
- TWICE A WEEK VIA US MAIL
- ONCE A MONTH VIA US MAIL
- ONCE A DAY VIA COURIER
- ONCE A WEEK VIA COURIER
- TWICE A WEEK VIA COURIER
- ONCE A MONTH VIA COURIER

IMPORTANT! Please provide two (2) types of the following identification: driver's license, armed forces, or government card; passport or alien registration card or social security card or other credential showing your signature and a serial number or similar information that is traceable to the bearer.

I certify that the information submitted is true and accurate.

X _____
Signature of Authorized Signer

Date

Thank you for choosing Business America Services

Please call 802-868-7244 with any questions