



HOTEL NAME: Hilton Orange County / Costa Mesa
ADDRESS: 3050 Bristol Street
Costa Mesa, CA 92626

FAX: 714-438-4934

CREDIT APPLICATION
Confidential Information

Name of Company Requesting Direct Billing: _____
 Address: _____
 City: _____ Telephone: _____
 State: _____ Zip: _____
 Dun & Bradstreet Number: _____ Fed Tax ID : _____
 Listed in Name of: _____
 Group Name: _____
 Inclusive Booking Dates: _____
 Group Contact: _____ Telephone: _____
 Address: _____
 City: _____ Fax: _____
 State: _____ Zip: _____

DIRECT BILLING HAS BEEN REQUESTED AS INDICATED:

- 1. Guest Room Accounts: _____ All charges for specified guests - provide list
 _____ Room and tax only for specified guests - provide list
- 2. Catering _____ All catering/banquet charges
- 3. Miscellaneous: _____ Provide list

BANK REFERENCES:

Bank Name: _____ Contact: _____
 Full Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____ Account #: _____ ABA #: _____

HOTEL REFERENCES (Most Recent History):

Hotel Name: _____ **Dates** _____

Full Address: _____ **Telephone:** _____
City: _____ **State:** _____ **Zip:** _____

Hotel Name: _____ **Dates** _____

Full Address: _____ **Telephone:** _____
City: _____ **State:** _____ **Zip:** _____

AGREEMENT & RELEASE:

I (We) agree if credit is extended, to pay the amount due upon receipt of the first statement. In accordance with the Privacy Act, Freedom of Information Act, the Fair Credit Reporting Act, and any similar federal, state or local statutory or common laws or regulations, I (We) expressly authorize the above-named references, any credit reporting agency, any law enforcement agency (federal/state/local) and any person or entity with knowledge of information relevant to this request for credit to release this information to the hotel (together with its owners, partners, parent, subsidiaries and affiliates, and their officers, directors, agents and employees, "Hotel") and Hotel to request, obtain and use such information as it sees fit. I (We) hereby agree to release, indemnify, defend and hold harmless Hotel and any all other persons or entities, including without limitation those providing information, from any and all liability for losses, claims, injuries, liabilities, and damages of whatever kind or nature, whether known or unknown, including without limitation those based upon defamation, invasion of privacy, and rights of publicity and personality, which may at any time arise or accrue to me (us) or my (our) heirs, successors, parents, subsidiaries, assigns, officers, directors, employees, agents or other persons or entities claiming by or through us, on account of provision of such information or reliance on such information or on other information gathered pursuant thereto and hereto. I (We) hereby authorize this Credit Application and



release to be shown and delivered to such persons, with a copy of this Credit Application and release to be as valid as the original.

Authorized Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE -- FOR OFFICE USE ONLY

Estimated Amount of Charges -- To be Completed by Originator

Rooms:	\$ _____	Credit Approved By:	_____
Catering/Banquet:	\$ _____	Date:	_____
Meeting Room Rental:	\$ _____	Credit Limit:	\$ _____
Other:	\$ _____	Credit Denied:	_____
Total:	\$ _____	Advance Deposit Required:	\$ _____
Deposit Received:	\$ _____	File #:	_____
Sales Rep:	_____		
M & C Rep:	_____		
Catering Rep:	_____		

(Always Attach Copy of Contract)

