







Standard Direct Bill Application

A credit application is required to be on file with Marriott Business Services for customers requesting direct billing at any participating Marriott, Ritz-Carlton, Renaissance or Gaylord hotel. The information will be used for Marriott's centralized credit evaluation and maintenance for participating hotels.

I. MASTER ACCOUNT INFORMATION										
Firm/Organization Name:										
Date(s) of F										
D-U-N-S® Number: Number of Employees:										
Accounts Payable Contact Name:										
Title:								Phone:		
Email Address:								Fax:		
Accounts Payable Address			ss:							
City:				State:				Zip:		
							•	•		
II. HOTEL REFERENCES (Highest direct bill references within last two years)										
Hotel Name	:							Phone:		
								Fax:		
								Email:		
Date of Function:					Approximate Amount Spent:					
Hotel Name:						Phone:				
								Fax:		
								Email:		
Date of Function:				Approximate Amount Spent:						
Hotel Name:								Phone:		
								Fax:		
								Email:		
Date of Function:				Approximate Amount Spent:						
III. PAYMENT TERMS										
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Payment is due immediately upon receipt of statement. In the event such payment is not made within 30 days after receipt of the original statement. It is										
agreed that the Marriott International may impose a LATE PAYMENT CHARGE at the rate of 1 ½ % per month (ANNUAL RATE 18%), on the unpaid balance, and reasonable costs of collection, including attorney fees. Please contact us immediately if you have any questions regarding this statement.										
balance, and re	easonable	e costs	of collec	tion, including	attorney fees.	Please contact	t us immediately if	you have any que	estions regarding this statemer	nt.
Name					Date:					
Name					Date.					
(Please Print)										
By returning this form I hereby authorize Marriott International to check references, and agree to hold Marriott International harmless from any action										
arising out of the legitimate and proper conduct of those reference checks.										
Diagramatica	n to:					Email:	MDC Crostit	@Marria44 a a	<u> </u>	
Please return to:						Email:	MBS.Credit@Marriott.com			
Customer:						Fax:	866-517-4367			