



Service Application

Complete one application per operating location or checking account to be used for deposits. For immediate account activation, you may complete this application online at <http://www.rcklockbox.com>

Agent: _____

Business Name: _____

Contact Name: _____

Address Line 1: _____

Address Line 2: _____

City: _____

State: _____ Zip Code: _____

Telephone Number: _____

Fax Number: _____

Tax ID (EIN or SSN): _____

Email Address: _____

Web Site URL (if applicable): _____

By submitting this application, you agree to the terms and conditions set forth by RCKLockBox.com and posted at <http://www.rcklockbox.com/terms.html>.

Name: _____

Signature: _____

Title: _____

Date: _____

Mail completed application to:
RCK LockBox

**1130 Broadway Plaza, Suite 202
Tacoma, WA 98402**

**Or fax completed application to:
1-253-284-0324**

You will be contacted with your RCK LockBox ID Number and password.

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Tel: 253-284-0320 | Fax: 253-284-0324