Trump Taj Mahal Casino Resort
Table Games / Slot Credit Questionnaire

Thank you for your interest in Trump Taj Mahal Casino Credit. Please complete this Credit Questionnaire and return the form to us by dropping it off at our Casino Credit Office, emailing it to david.kessler@taj.trump.com, faxing it to (609) 449-6870, or mailing it to us at Trump Taj Mahal Casino Credit Department at PO Box 147 Atlantic City, NJ 08401. If you would like to discuss your credit or you have any questions, please contact any of our Credit Executives at 1-800-825-0006.

Credit Limit Requesting: $300 $1,000 $1,500 Other Amount_____

Name:_____
(Last) (First) (Middle)

Date of Birth:_____
(Month / Day / Year)

Address:_____
(Street)

_____
(City) (State) (Zip)

Phone:_____
(Home) (Business/Cell)

Social Security Number:_____
Taj Card Number:_____
Next Arrival Date:_____

Bank Account Information

Please note, only personal and sole proprietor business accounts are accepted.

Bank Name:_____

Address:_____
(Street)

_____
(City) (State) (Zip)

Account Number:_____

RELEASE AUTHORIZATION TO ALL BANKS, FINANCIAL INSTITUTIONS, and CREDIT REPORTING AGENCIES: I authorize the Trump Taj Mahal Casino Resort to conduct an investigation into my credit worthiness. You are hereby authorized to release any and all information pertaining to said investigation, as required by an appropriate employee, agent or representative of the Trump Taj Mahal Casino Resort. A photo static copy of this authorization will be considered as effective and valid as the original.

_____
Customer Signature (signature as on checks)