

Kansas Turnpike Authority

K-TAG ACCOUNT TRANSFER FORM

K-TAG Account Number: _____

Name: _____ Social Security Number: _____

Joint Name: _____ Social Security Number: _____

Company Name (if applicable): _____

Address: _____
Street City State Zip Code

E-Mail Address: _____

Telephone Number: _____
Please circle: Home Work Cell

_____ K-TAG CLASSIC

Please transfer my K-TAG account to the K-TAG CLASSIC, prepaid/10% discount option. I understand that a positive prepaid account balance must be maintained to qualify for the 10% discount. I further understand I will pay a \$1.00 per month charge for each K-TAG issued that will be deducted from the prepaid account balance.

_____ My K-TAG

Please transfer my K-TAG account to the My K-TAG, Purchase Program option. I understand that I will not receive a discount for tolls incurred. I understand that I will purchase my K-TAG at a rate of \$34.00 for a first generation tag or \$15.00 for a sticker tag; \$10.00 of the purchase price will go toward toll charges incurred. I further understand I will pay a transfer fee of \$5.00. These fees will be deducted from my existing account balance or will appear on my next statement. Credit or Debit Card **REQUIRED**.

Credit/Debit Card Number: _____ Exp. Date: _____

_____ Number of additional tags requested.

CREDIT INVESTIGATION REPORT

KTA has the right to investigate the credit of each application prior to extension of credit, credit renewal and update of records. Upon request, you will be given the name and address of the credit bureau supplying the report. Also, your signature(s) on this application will authorize direct release of credit or banking experience to KTA upon their request from any of the references listed above. KTA may also report its credit experience with you to any credit bureau.

If I have circled the credit card option, I agree to maintain a valid credit card. I authorize the KTA to charge my credit card for the amount necessary to satisfy my obligation under this agreement.

Authorized Signature
Date _____

Authorized Signature

All correspondence or billing inquiries must be directed to:

Kansas Turnpike Authority
ATTN: K-TAG
PO BOX 780007
Wichita, KS 67278-0007

K-TAG Customer Service 1-800-USE-KTAG. (873-5824)
E-Mail: ktag@ksturnpike.com
Fax: (316) 651-0864