

# AccuLinQ - AccuLinQ Corporate Agreement

## Corporate Application

Office Use Only

Sales: 585

AUTH #:

### ACCOUNT INFORMATION

Account Name \_\_\_\_\_ Contact Person \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

Fax# ( \_\_\_\_\_ ) \_\_\_\_\_

Business Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

**Option 1: Complete Credit Card information below and sign Corporate Application. Fax to 800.909.7994**

### CREDIT CARD INFORMATION (For expedited order processing)

Name That Appears On Credit Card \_\_\_\_\_

Billing Address For Credit Card \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

VISA [ ] MasterCard [ ] Discover [ ] AMEX [ ] Credit Card # \_\_\_\_\_

**NOTE:** PAYMENTS WILL BE PROCESSED BY Southwestinet, Inc. CC Expiration Date \_\_\_\_\_

**D&B # (Or Soc Sec#):** \_\_\_\_\_ Amex: 4 digits above your card number on the front.  
Visa/MC: 3 digits after your card number on the back. CC CID \_\_\_\_\_

**Option 2: My company is applying for corporate calling card service and therefore we would like the attached credit information to be reviewed for credit worthiness. If this credit information is acceptable my company agrees to make monthly payments in accordance with Southwestinet's billing terms. \$2 Monthly billing fee for approved Corporations.**

The following forms will need to be completed and submitted with this application:

- 1) AccuLinQ Corporate Application
- 2) AccuLinQ Corporate Agreement
- 3) AccuLinQ Corporate Credit Application
- 4) AccuLinQ Calling Card User List

Cardholder agrees to 1) be liable for all charges to the billing card number issued on this account. 2) authorize credit card payment if account is past due. 3) pay a late fee if payment is not made by the due date on the unpaid balance at a rate of 1.5% per month. 4) hold Southwestinet and its agents harmless from any and all damages. 5) allow a routine credit check from any credit agency. Cardholder represents that he/she has the authority to order this service. Southwestinet assumes no liability for calls not completed due to circumstances beyond its control. Unless prohibited under law, Southwestinet makes no warranties expressed or implied, except as stated in this agreement. Cardholders Credit Card will be debited by Southwestinet. Cardholder accepts the terms and conditions imposed by Southwestinet for the use of its service and agrees that a facsimile signature is binding. **Customer authorizes a one-time activation fee of \$1.00 per calling card to be charged to listed credit card. \*FCC mandated payphone access fee (.30¢) could apply to calls originating from a payphone.**

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_





<b>Office Use Only</b> Sales: AUTH #:
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Corporate Credit Application

**CORPORATE INFORMATION**

**PLEASE INCLUDE THE LAST TWO MONTHS SUMMARY PAGES FROM YOUR LD BILL**

Company Name: \_\_\_\_\_ Tax ID Number: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Fax # ( \_\_\_\_\_ ) \_\_\_\_\_  
Incorporated Name if Different from Above: \_\_\_\_\_  
Number of Years in Business: \_\_\_\_\_ D&B#: \_\_\_\_\_  
Our Legal Entity is:     Corporation    Partnership    Proprietorship    Other (Explain) \_\_\_\_\_  
Name(s) of Principal(s): \_\_\_\_\_  
Title: \_\_\_\_\_

**BANK REFERENCE**

Bank Name: \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

**TRADE REFERENCES**

**2 COMPANY REFERENCES REQUIRED**

Please do not use any of the following for reference: Office Supply Stores, Utility Companies, Shipping/Overnight Services, Phone Companies

#1 Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Fax# ( \_\_\_\_\_ ) \_\_\_\_\_

#2 Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Fax# ( \_\_\_\_\_ ) \_\_\_\_\_

I hereby authorized Southwestnet, Inc. to conduct a routine credit check in connection with my application for service. Southwestnet may use any information obtainable through this credit application of any credit reporting agencies. I understand that such information will be held strictly confidential and will remain Southwestnet 's property whether or not credit is extended.

Signature \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Authorized Officer Only)

 **AccuLinQ - AccuLinQ Corporate Agreement**

To Qualify for Corporate billing, \_\_\_\_\_ agrees to the following conditions in order to qualify for direct billing:

\*Submit credit application to AccuLinQ. Fax completed credit application to 800-909-7994.

\*Customer agrees that it will use at least fifty dollars (\$50.00) in AccuLinQ usage, excluding any and all taxes, monthly service fees and payphone fees. This will go into effect on Customers first full billing cycle. If Customer does not use at least fifty dollars (\$50.00) in AccuLinQ usage, Customer shall pay for each such month the actual amount billed for that service plus the difference between that amount and the Monthly Commitment of fifty dollars (\$50.00). Customer agrees to a \$2 monthly service fee for their account.

\*Customer is on a month-to-month term. Either customer or AccuLinQ may terminate this agreement by providing written notice thereof, which notice must be received by the other party not less than thirty (30) days prior to the date of termination. Customer's notice of termination must be sent to: AccuLinQ, 1300 S. University Drive, Suite 511, Fort Worth, TX 76107.

\*Customer agrees to pay all invoices for Services within 14 days from the date of the invoice. Customer agrees that all Services will be discontinued if an invoice is not paid within 30 days from the date of the invoice. Any amounts that are not paid by Customer when due shall accrue interest at the rate of 1.5% per month commencing on the day following the date payment is due. Customer agrees that AccuLinQ Telecom, Inc. may charge Customer's credit card for any account balances that are more than 30 days past due.

\*In the event any of the calling cards or PINs issued to Customer are lost, stolen or are otherwise being used without Customer's authorization, Customer will be liable for all charges for Services provided to such calling cards or PINs until such time as Customer notifies AccuLinQ Telecom, Inc. of the unauthorized use. AccuLinQ Telecom, Inc. makes no warranties or representations, either express or implied, regarding the Services provided hereunder. AccuLinQ Telecom, Inc. shall have no liability for any loss or damage sustained by reason of any failure and/or breakdown of facilities associated with the Services or for any interruption or delay of the Services.

ACCEPTED AND AGREED:

\_\_\_\_\_  
Print Company Name

ACCULINQ INC.

\_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Print Name and Title