

PLEASE FILL OUT AND RETURN THE FOLLOWING INFORMATION ALONG WITH YOUR FIRST ORDER REQUEST. PLEASE ALSO DATE AND SIGN STATING THAT YOU AGREE TO THE TERMS AND PRICES PRESENTED.

*****PUNCTUAL ABSTRACT CO, INC. NEW CLIENT INFORMATION*****

COMPANY NAME: _____

OWNER'S NAME: _____

FEDERAL ID#: _____

ADDRESS: _____

PHONE #: _____ (OR) _____ FAX #: _____

EMAIL ADDRESS: _____

ACCOUNTS PAYABLE CONTACT PERSON: _____

PHONE #: _____ (OR) _____ FAX#: _____

EMAIL ADDRESS: _____

MONTHLY STATEMENT ADDRESS/EMAIL: _____

METHOD OF PAYMENT FOR SERVICES PROVIDED (CIRCLE ONE):

CHECK OR DIRECT DEPOSIT

PAYMENT DUE (45) DAYS FROM COMPLETION OF SERVICES

IF PAYMENT IS NOT RECEIVED WITHIN FORTY-FIVE (45) DAYS OF COMPLETION OF WORK THEN YOU AGREE TO THE PAYMENT OF INTEREST THEREON AT THE RATE OF ONE AND ONE HALF PERCENT (1 ½%) PER MONTH FROM THE DATE OF COMPLETION OF WORK UNTIL PAID. SHOULD IT BE NECESSARY TO EMPLOY AN ATTORNEY TO COLLECT ANY AMOUNT NOT PAID, YOU AGREE TO PAY ATTORNEYS FEES IN AN AMOUNT EQUAL TO TWENTY-FIVE PERCENT (25%) OF ANY AMOUNT SOUGHT TO BE COLLECTED AND ALL COSTS OF COLLECTION.

DATE: _____ SIGNATURE: _____

PRINT NAME: _____

TITLE: _____

ALL ORDERS AND REQUESTS SHOULD BE EMAILED TO PUNCTUALORDERS@PUNCTUALABSTRACT.COM OR FAXED TO (504) 341-7911 (TOLL FREE: 888-341-7911)

CONTACTS: MELISSA BURAS / OFFICE MANAGER & CUSTOMER SERVICE MANAGER / (504) 341-7900 X 14
EMAIL: MELISSA@PUNCTUALABSTRACT.COM

ACCOUNTING DEPARTMENT:

VICKIE BREAUX / (504) 341-7900 X 21
EMAIL: VLBREAUX@PUNCTUALABSTRACT.COM

CANCELLED ORDERS MUST BE SUBMITTED IN WRITING AND SHOULD BE RECEIVED IN OUR OFFICE BEFORE THE REQUESTED WORK IS RECEIVED BY OUR OFFICE OR YOU WILL BE RESPONSIBLE FOR PAYMENT OF ANY SERVICES RENDERED