



**NASPO Account Application**

Company Name: \_\_\_\_\_

Company Contact: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Billing Contact Name: \_\_\_\_\_ Billing Contact E-mail: \_\_\_\_\_

Billing Contact Phone: \_\_\_\_\_ Billing Contact Fax: \_\_\_\_\_

Billing Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**ACCOUNT SET-UP AGREEMENT**

Please list top languages serviced: \_\_\_\_\_

Hours and days of Operation: \_\_\_\_\_

Type of Business (i.e. medical, social, legal): \_\_\_\_\_

**Additional data collection:**

We offer two numeric data fields to be gathered at the time of the call (i.e.: employee id, employee extension, case number, location code, department number, etc.). This information will be included on your monthly invoice and call detail records on our client portal. Default invoices will contain the following information for each call record: CTS Job Number, Date of the Call, Time of the Call, Language Requested, Interpreter ID, Duration of the Call, and Cost of the Call. If you do not require additional numeric data, please indicate below.

Please check here if you do not require any additional data collection (otherwise indicate below): \_\_\_\_\_

Numeric data field 1: \_\_\_\_\_

Numeric data field 2: \_\_\_\_\_

Please note, CTS LanguageLink is unable to gather additional details after the call has been completed.



**PAYMENT AGREEMENT**

I \_\_\_\_\_ authorize CTS LanguageLink to bill (Company Name) \_\_\_\_\_  
\_\_\_\_\_ for the charges generated by on demand telephonic interpretation services at \$0.6216 cents per minute. Each call has a one minute minimum billed in six second increments. Setup of the account includes toll-free number, access code, additional data collection (if applicable), and web portal access to retrieve electronic invoices.

I \_\_\_\_\_ in the name of (Company Name) \_\_\_\_\_  
\_\_\_\_\_ agree to pay in full and within thirty (30) calendar days of the billing date the amount generated for the interpretation services.

**Terms & Conditions**

CTS LanguageLink will bill for charges generated for telephonic interpreting per Master Pricing Agreement #50-000-14-00002 AA and your state contract.

Additional services not covered in the Master Pricing Agreement such as Translation, Localization, Transcription, Video Remote Interpreting, 3<sup>rd</sup> party international calls, hard copy invoicing and reporting, and pre-scheduled Telephonic are gladly offered under separate agreements or quotes. Please feel free to contact our sales department if you are interested in adding any of these services.

**Please fax the completed application to: 1-360-823-2287 Attention: Mo Taabbakh**

**Email to naspo@ctslanguagelink.com**

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

Date \_\_\_\_\_

Account Managers: Sarah Gamble and Mo Tabbakh