NASPO Account Application
Please visit https://naspo.language.link to complete this application online

Company Name: _____

Company Contact: _____   Billing Contact Name: _____

E-mail Address: _____   Billing E-mail: _____

Phone Number: _____   Billing Contact Phone: _____

Address: _____

City: _____   State: _____   ZIP: _____

Billing Address (if different): _____

P.O. Box: _____   City: _____   State: _____   ZIP: _____

General Account Information

Please list the top languages serviced: _____

Hours and days of operation: _____

Estimated Minutes per Month: _____

Type of Business: _____

Minutes Expected per month:

☐ 0-100 _____

☐ 101-500 _____

☐ 501-1000 _____

☐ 1001-10,000 _____

☐ 10,001-50,000 _____

☐ 50,001-100,000 _____

ADDITIONAL REPORTING: (OPTIONAL)

To better serve your needs you may select up to **ten** of the following fields to be gathered with every call. These fields should contain information required by your accounting staff to track and pay for services rendered. These fields **MUST** be able to be answered with numbers. This information will be included on your invoice and call detail records on your client portal. Fields may be selected or unselected by clicking on them.

At the time of the call, do you want Language Link to collect any additional information?

☐ Yes   (Please choose up to **10** from below)   ☐ Not Interested

☐ Access Code	☐ Employee Extension	☐ Program Code
☐ Badge Number	☐ Employee Id	☐ Project Number
☐ Billing Code	☐ Hospital Code	☐ Purpose Code
☐ Budget Number	☐ Job Number	☐ Reference Number
☐ Call ID	☐ Load Number	☐ Region Number
☐ Case Number	☐ Location Code	☐ Section Number
☐ Claim Number	☐ Location Number	☐ Serial Number
☐ Client Code	☐ Order Number	☐ Site Number
☐ Control Number	☐ Personal Number	☐ Station ID
☐ County Number	☐ Phone Extension	☐ Unit Number
☐ Department Code	☐ Phone Number	☐ Verification Code
☐ District Number	☐ PIN Number	
☐ Division Code	☐ Position Number	

**Tracking information must be processed prior to being connected to an interpreter. The CSR and/or Interpreters cannot gather data after the caller is connected to an interpreter. Any changes to this process may incur additional charges.

PRICING INFORMATION

I _____ authorize Language Link to bill (Company Name) _____

for the charges generated by interpretation services. Please mark the box of which services and pricing model you would like to activate for your interpretation account.

Setup of the account includes toll-free number, access code, additional data collection (if applicable), and web portal access to retrieve electronic invoices.

Pricing Model 1:

☐ Over the Phone Interpretation (OPI) charges $.5714 per minute for all languages
   Each call has a one minute minimum billed in six second increments.

☐ Video-Remote Interpretation (VRI) charges $1.9950 per minute for ASL, $.8922 per minute all other languages
   Each call has a one minute minimum billed in six second increments.

Pricing Model 2:

☐ VRI/OPI charges $1.9950 per minute for ASL, $.8521 per minute for all other languages for both services.
   Each call has a one minute minimum billed in six second increments

Additional Services:

We also have Dual Handset phones and Y-cables available for an additional cost. Please indicate how many you need for your office.

_____ Dual Handsets phones $150.375 per phone

_____ Y-cable and additional handset $35.0875 each

☐ Translation Services

Translation services are included in this contract. Language Link is happy to provide complimentary quotes based on the Price Agreement under your state contract.

Terms & Conditions

Please note: By completing and submitting this account application, you agree to the entirety of the Terms & Conditions as noted in the State of Idaho Master Participating Addenda #90-000-18-00003AB.
Language Link will bill for charges generated for services per these terms.

Additional services not covered in the Master Pricing Agreement such as Transcription, Localization, third party international calls, hard copy invoicing and reporting 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.

Email to naspo@language.link