



AGENT ID: _____
 PLAN: _____
 TPV #: _____
 ACCOUNT#: _____

707 Wilshire Blvd., 12th Floor, Los Angeles, CA 90017
 Phone: 1-800-322-6927
 Fax: (213) 239-0920

SERVICE AGREEMENT

Commercial: _____ (Must fill out credit references) Est. Usage: _____
 Residential: _____ Est. Usage: _____

Customer Name: _____
(Please print name EXACTLY as it appears on your local phone bill)

Address: _____

City: _____ State: _____ ZIP Code: _____

Billing Address: _____
(If Different from above)

City: _____ State: _____ ZIP Code: _____

SSN: ___ - ___ - ___ / ___ - ___ / ___ - ___ - ___ - ___ FED ID: ___ - ___ / ___ - ___ - ___ / ___ - ___ - ___

Please Note, a full social security or nine digit federal ID number is needed for on-line billing

Main Phone line: _____ DA Additional Lines: _____ DA
 Additional Lines: _____ DA Additional Lines: _____ DA
 Additional Lines: _____ DA Additional Lines: _____ DA
Check mark DA if you want dial around service ONLY

Contact Information

Work Phone: _____ Mobile Phone: _____
 Email Address: _____

Domestic: Intralata (Local Toll) Pic ___ yes ___ no (not available in GA or ME)
Current Long Distance Provider: _____ **LEC (local provider):** _____

Toll Free Service: ___ Please check here if you would like to order a personal 8xx number. (If checked; 8xx form must be filled out)

Electronic Letter of Agency and Guarantee of Credit

I, the undersigned, hereby authorize Total Call International to provide long distance services on the phone line(s) listed in this Agreement and to act as an agent in all matters related to providing the services. I am the person authorized to order services on the phone line(s) listed in this Agreement. I understand that there may be a one-time charge by my local phone company to change long distance carriers. I also understand that I can be held responsible for any fraudulent usage. I guarantee to Total Call International the faithful payment, when due, for all charges incurred for services provided together with all pertinent federal, state and local taxes. If payments are not made when due and Total Call International's attempts to collect such payment is not successful, regardless of whether credit card billing is selected, the credit card may be charged without further notice to me.

AUTHORIZED SIGNATURE: _____ **DATE:** _____



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CREDIT APPLICATION

Company Name: _____

Nature of Business: _____

Year Established: ____ / ____ / ____ Federal Tax ID No.: _____

Dun & Bradstreet No.: _____

BANK REFERENCES

(Please complete Bank Release Form for each Financial Institution)

• Bank Name: _____

• Bank Address: _____

• Bank Officer: _____ Phone: _____ Account No.: _____

• Bank Name: _____

• Bank Address: _____

• Bank Officer: _____ Phone: _____ Account No.: _____

TRADE REFERENCES

• Company Name: _____

• Company Address: _____

• Contact: _____ Phone: _____ Account No.: _____

• Company Name: _____

• Company Address: _____

• Contact: _____ Phone: _____ Account No.: _____

Signature: _____ Date: _____

Print Name: _____