



# IMAGE OFFICE SERVICES

www.imageofficeservices.com

*There is a difference*

*Personal*

*Professional*

*Confidential*

Service Agreement for answering services to be provided by Image Office Services (**Service**) for undersigned (**Subscriber**).

Acct #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

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

Billing Address: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

Contact Phone Number(s): \_\_\_\_\_

Federal ID #: \_\_\_\_\_ (or) Social Security #: \_\_\_\_\_

Base Rate: \_\_\_\_\_ Calls Allowed: \_\_\_\_\_ Overcall Rate: \_\_\_\_\_ Per Call

Access Fee: \$4.00 Holiday Premium (six major holidays): \$5.00

Set-up Fee (one time fee): \$30.00 Deposit: \_\_\_\_\_

Custom Services:

On-Call Maintenance: \_\_\_\_\_ E-Mail Dispatch: \_\_\_\_\_ Call Patching: \_\_\_\_\_

High Maintenance: \_\_\_\_\_ Multiple Dispatch: \_\_\_\_\_ Mailing Messages: \_\_\_\_\_

Additional Phone Line: \_\_\_\_\_ Specialized Forms: \_\_\_\_\_ Appointment Scheduling: \_\_\_\_\_

Order Taking: \_\_\_\_\_ Account Maintenance: \_\_\_\_\_ Fax Service: \_\_\_\_\_

Copy Service: \_\_\_\_\_ Mail Service: \_\_\_\_\_ Toll Free #: \_\_\_\_\_

Additional Services:

Long Distance: Based on Usage

Other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### TERMS & CONDITIONS

1. Services are provided on a monthly basis, and will continue automatically from month-to-month unless canceled in writing by Subscriber with thirty (30) day notice or terminated by Service for cause.
2. Subscriber agrees to pay in advance, one month base rate and associated charges plus a deposit equal to a minimum of one month's base rate based on Subscriber's expected volume and credit evaluation. Deposit will be applied to the last month of service. Deposit and first month's base rate must be paid within five (5) business days from the first day of service.
3. Monthly invoices are due to be paid by the 15th of each month. Accounts not paid within 7 days of the due date are subject to a monthly recurring five dollar (\$5.00) handling fee until paid and account is brought current. Any past due balance of thirty (30) days will result in disconnection of service on the 26th of that month unless payment has been received.

4. Subscriber agrees to pay for all charges arising from collect calls accepted for Subscriber and for all charges incurred by Service, on Subscriber's behalf, in the course of delivering services to Subscriber.
5. Service reserves the right to change, alter or modify its services and/or charges for services and Subscriber's rates at any time without prior notification. Changes will be communicated to each client, if and when they occur.
6. In the event Subscriber's account becomes past due and is referred to an outside collection agency or attorney, Subscriber will be responsible for all collection costs (up to 33% of the balance due) incurred for the collection of past due balances, along with reasonable attorney fees and court costs incurred by Image Office Services. A monthly recurring five-dollar (\$5.00) handling fee will be applied to Subscriber's account until the account is paid in full.
7. Returned checks are subject to a twenty dollar (\$20.00) returned check fee.
8. Service agrees to use its best efforts in handling Subscriber's calls in a courteous and accurate manner, according to Subscriber's instructions. Subscriber agrees to hold Service harmless from any and all claims and liability arising from errors or omissions by Service or for any loss, injury, or damage to property or persons sought to be protected by the Service, or any alarm systems connected therewith, claimed by anyone, including Subscriber's insurer, to have resulted from the Service's negligence, misconduct, errors, or omissions.
9. Service agrees that all Subscriber's messages and information are to be kept Confidential, except to cooperate with law enforcement agencies in disclosing necessary information.
10. Service will abide by all applicable Minnesota and Federal Statutes.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_