



Corra New Account Application

ORGANIZATION INFORMATION

Organization Name: _____

Physical Address: Street: _____

City: _____ State: _____ ZIP: _____

Main Telephone: _____ Main Fax: _____

Federal Employer
Identification
Number (FEIN): _____

Website URL: _____

Primary Contact: (main account user) _____

Title: _____ Email: _____

Telephone: _____ Fax: _____

Additional User Name: _____

Telephone: _____ Email: _____

Additional User Name: _____

Telephone: _____ Email: _____

Note: For any additional users, please attach a list including the above contact information.

BILLING INFORMATION

Billing Contact Name: _____

Title: _____ Email: _____

Telephone: _____ Fax: _____

My billing address is the same as my street address:

Billing Address: _____

City: _____ State: _____ ZIP: _____

PAYMENT OPTIONS

1. Major Credit Card (Your credit card will be charged for purchases made)

Card Type: Mastercard VISA Amex

Name on Credit Card: _____

Credit Card #: _____ Exp Date: _____

CSC (Card Security Code) on Credit Card: _____

Credit Card Billing Address: My credit card is same my physical address

Street: _____

City: _____ State: _____ ZIP: _____

2. Apply For Corra Credit (A company credit account will be created and you will be billed on a monthly basis)

Note: credit is only extended to accounts where the monthly services are anticipated to exceed \$500. Application review is complete in 1-2 business days.

By submitting this Account Application, User Applicant authorizes Corra to verify all application information, and when credit is being apply for, to verify credit references and bank information.

Authorized
Signature: _____ Date: _____

Name: _____

Title: _____