



CCM Customer Agreement

Thank you for choosing Cascade Computer Maintenance, Inc. (CCM) to provide computer services on a time and materials basis: we appreciate your business. Please read, sign, and return this form promptly, as it allows CCM to proceed as instructed. First-time customers will be billed C.O.D. or a Purchase Order may be issued. Once a credit application has been approved and account is established with CCM, future service calls may be invoiced.

Company: _____ Date: _____
 Address: _____ Contact: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ FAX: _____ P.O. Required: Yes No
 Ownership: Corporation Partnership Proprietorship Individual

Description of Business: _____

At Present Location Since (date): _____ Year Established: _____

Time and Materials Billing

- ❖ Standard Rates are \$85.00 per hour. Technicians required for multi-user operating systems (i.e. Microsoft NT / 2000, Novell, or SCO Unix) are billable at \$120.00 per hour. Standard time is Monday – Friday, 8:00am – 5:00pm. Overtime is billed at one and one half times (1 ½) standard rates during all other hours. Service is charged portal-to-portal, from the nearest CCM office to customer’s location.
- ❖ Any service time quoted is an estimate only. Actual time will be billed. Customers may issue a “not to exceed” Purchase Order with a set dollar or time limit. A technician will notify you if additional time is required.

Internal Use	
Customer Number	_____
Sales Person	_____

The Business Establishment or Individual named above hereby applies for credit. The information and statements in this application are true and complete, and are made for the purpose of establishing an open account line of credit. Cascade Computer Maintenance, Inc. (CCM) is hereby authorized to obtain any information necessary from any source concerning the statements in this application. This application shall serve as a release to permit such sources to disclose information to CCM.

The Business Establishment or Individual named above understands and agrees that, unless otherwise agreed to in writing, all credit purchases must be paid in accordance with CCM’s normal terms of sale, which are currently Net 15 from date of invoice. The Business Establishment or Individual named above also understands and agrees that amounts 30 days past due will be subject to late payment charges of 1.5% per month. The Business Establishment or Individual named above will pay a \$15.00 service charge in the event that any checks written to CCM are dishonored for any reason. In the event that it becomes necessary for CCM to institute suit or otherwise incur collection costs to collect any amount due, the Business Establishment or Individual named above agrees to pay those costs of collection, including reasonable attorneys’ fees.

The Business Establishment or Individual named above understands and agrees that all sales and other transactions between us will be governed by the laws of the State of Oregon, and any dispute arising from our business relationship will be litigated exclusively in the courts of Oregon. The Business Establishment or Individual named above consents to the jurisdiction of Oregon courts.

The information provided to Cascade Computer Maintenance, Inc. will be utilized only for the purposes of providing the Business Establishment or Individual named above with credit. By signing this agreement, the Business Establishment or Individual named above agrees to be bound by the terms hereof and asserts that all information contained herein is accurate. The Business Establishment or Individual named above further agrees to and authorizes CCM to obtain information for the purpose of establishing credit status.

Name: _____ Title: _____
 (Please Print)
 Signed: _____ Date: _____
 (Authorized Signature Required)

References

*Provide only names of those you buy from on open account.
Please print neatly and include as complete information as possible.*

Name: Account#:

Contact: Phone:

Address:

City/St/Zip: Fax:

Name: Account#:

Contact: Phone:

Address:

City/St/Zip: Fax:

Name: Account#:

Contact: Phone:

Address:

City/St/Zip: Fax:

Name: Account#:

Contact: Phone:

Address:

City/St/Zip: Fax:

Bank: Account#:

Contact: Phone:

Branch: Fax:
