www.verifications.com



Verification Services Inc. 808 South Dixie Highway Hollywood, FL 33020 Phone: 1-800-809-7732

Fax: 1-800-992-9402

New Client Account Request Form (rev. web 2017)

Please complete this form and fax to: 1-800-992-9402 or 1-954-929-5959.

Alternatively, you can email the completed form to helpdesk@verifications.com

				Comp	any In	torm	ation										
Comp	pany Name:										# of Employees:						
Referred by:		circle one:	CRAWFO	ORD CON	TRACT	OR	NEXXU	is c	CA	LC	3 FS	sg	ОТ	HER			
Туре	of Business:							EIN:		-							
Primary Contact:								Title:									
EMAIL:																	
Address:																	
City:					ate:	Zip Code:											
Phone #:						Fax #:											
Credit Card Information (Visa/Mastercard ONLY)																	
Billing Zip Code: Exp Date (MM/YY):																	
Please check all services for which you are interested																	
Cor Edu	r Package mprehensive Cr ucation Verifica ployment Verifi		Consumer Credit Civil Court Motor Vehicle Records Drug Screenings														
Authorized Users (please complete all fields)																	
	Name					Title				P	none	#					
1	Funcil Adduses																
	Email Address Submit Ro	Submit Requests ?					;?		View Invoices?								
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2	Email Address																
	Submit R	Submit Requests ? V					ew Results?						View Invoices?				
·																	
We attest that we intend to use the information from the background checks for employment purposes only.																	
We agree to hold harmless all 3rd party verfiers.																	
Either party may cancel this Agreement at any time.																	

Signature and Title Date Signed