

**Accounts Receivable Management Specialists** 

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## **COMMERCIAL COLLECTION ASSIGNMENT FORM**

YOUR INFORMATION	DATE:
YOUR COMPANY NAME:	CLIENT NO:
COLLECTION ACTIVITY AUTHORIZED BY:	SIGNATURE:
ACCOUN	NT DETAILS
YOUR CUSTOMER ACCOUNT No.:	DATE OF LAST CHARGE / DELINQUENCY: (REQUIRED FOR CREDIT BUREAU REPORTING)
TOTAL CLAIM: \$	DEBTOR'S BANK: ACCOUNT NUMBER:
INTEREST RATE TO BE CHARGED: % P/A	
IS THERE A SETTLEMENT AMOUNT AUTHORIZED IF AN ACCOUNT MAY BE SETTLED QUICKLY?	IS THERE A SIGNED CONTRACT? YES NO  DEBT INCURRED BY:
\$ OR % OF THE TOTAL CLAIM	GOODS PURCHASED SERVICES RENDERED
ASSIGNMENT TYPE (CHOOSE ONE):	LEASE RENTAL
FINAL NOTICE PRE-COLLECT FULL COLLECT	OTHER - DETAILS:
,	SS) DEBTOR INFORMATION
LEGAL NAME OF BUSINESS:	TRADE NAME / STYLE:
Address:	PHONE NO:
	FAX No:
	Is There a Credit Application? Yes No
	Is THERE A PERSONAL GUARANTEE? YES NO
CONTACT FOR BUSINESS ABOVE:	APPLICATION AND / OR GUARANTEE SIGNED BY:
OTHER INFORMATION:	

\*Terms and Conditions – Commissioned Collection System Only (For complete details please see Schedule of Collection Terms and Fees)
Regular commission will be billed at prevailing rates and/or deducted from funds available. The creditor agrees to report
Immediately, every payment or return of goods, made to the creditor. Commission applies on accounts paid to our agency or to the
creditor and on the value of goods returned to the creditor. Legal action will not be commenced without authorization of the
creditor, unless previously arranged. All court costs and legal fees are the responsibility of the creditor. Upon 90 days written notice,
the agency agrees to return to the creditor, all accounts upon which no payment or arrangements to pay have been made.

## LEADERS IN ACCOUNTS RECEIVABLE MANAGEMENT SERVICES