



CUSTOMER PROFILE

Complete, sign, scan and return to Customer Service at customerservice@ddslegal.com or fax to 714-662-3379, 213-482-5006, or 619-263-3301.
 By providing the following information, I am authorizing DDS to establish an account, provide services and charge all applicable fees to:

FIRM/COMPANY _____

ADDRESS _____ **SUITE** _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE** _____

FAX _____ **WEBSITE** _____

PRIMARY CONTACT _____ **TITLE** _____ **EMAIL** _____

<u>PRINCIPALS</u>	NAME _____	NAME _____
	HOME ADDRESS _____	HOME ADDRESS _____
	_____	_____
	DRIVERS LICENSE _____	DRIVERS LICENSE _____

BUSINESS **CORPORATION** **PARTNERSHIP** **SOLE PROPRIETOR** **LLC** **LLP**

BILLING CONTACT _____ **EMAIL** _____ **DIRECT PHONE** _____

If a billing contact email is provided, your account will be enrolled in paperless invoice delivery, you will not receive paper invoices. After invoicing, you can view individual job charges by visiting the Customer Service Center in our secure online ordering and tracking system at www.ddslegal.com.

ONLINE ORDERING & TRACKING. DDS online ordering and tracking is fast, simple & secure. You authorize users accessing your account. Add, delete, or change authorized users at any time. Users may place orders for any type of litigation support – Court, Process, Messenger, Copy, Deposition, File & Serve, and E-file/Fax File (quick & easy .PDF file upload). To start, please provide authorized name and email address for each user (attach additional sheets if necessary):

Name _____	Name _____	Name _____
Email _____	Email _____	Email _____

Online ordering is optional. CHECK HERE if you prefer other methods of placing orders, a Customer Service representative will contact you shortly.

TERMS & PRINCIPAL AUTHORIZATION. All invoices are payable within ten (10) days from date of invoice. Payment is not contingent upon any case settlement. All accounts over thirty days past due are subject to finance charges of one and a half percent (1.5%) per month. If DDS initiates legal action, for applicant’s lack of payment, DDS shall be entitled to receive from applicant reasonable attorneys’ fees to be determined by the court in which such action is brought. Accounts may be required to provide a credit card payment authorization before any services are rendered.

By signing below, I, Principal for the above Firm/Company, agree to the foregoing terms and authorize DDS to establish an account, provide services and charge all applicable fees.

PRINCIPAL SIGNATURE _____ **PRINT** _____

PRINCIPAL TITLE _____ **DATE** _____