



North Carolina PSAP
Client Set-up Form (CSF)

Organization Information

Name of Organization:	
Address (street, city, state, zip):	
Main Contact Name:	
Main Contact Title:	
Main Contact Phone:	
Main Contact Fax:	
Main Contact E-mail:	

Billing Information

Bill-to Organization Name:	
Sales Tax Exempt:	Yes No
*Sales Tax Exemption #:	
<i>*If exempt, client should email Tax Exemption Certificate to sales person/account manager, or fax to Voiance Finance Department at (520) 745-9022.</i>	
Address (street, city, state, zip):	
Billing Contact:	
Billing Contact Title:	
Billing Contact Phone:	
Billing Contact E-mail:	

Other Information

Invoice Type:	Online Standard
<i>*Note: Client will not receive mailed paper copy if online invoicing is selected.</i>	
Online Invoicing Contact Name:	
Online Invoicing Email:	