

NEW CLIENT SETUP FORM

Please Complete and FAX to 800-844-2722

Company Information:

Company Name _____

Other Trade Names _____

Address _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

Contact: _____ Billing Contact _____

Billing Contact Email Address for Notification of Account Information _____

Type of Business in the State of _____ Corporation _____ Partnership _____ Sole Proprietor _____

Phone _____ FAX _____ Email _____

Number of Employees _____ Approximate Employee Turnover Rate _____%

Employment Screening Services:

We expect to order the following Employment Screening Services:

<u>Screening</u>	<u>Number Of Orders Per Year</u>
Previous Employment Verifications	_____
Education Confirmations	_____
Professional License & Credential Checks	_____
Personal and/or Professional References	_____
Federal Criminal Records	_____
Criminal Records	_____
Driving Records	_____
Employment Credit Reports	_____
Social Security # Validation & Address Search	_____
D.O.T. Screening For Commercial Drivers	_____

Ordering/Result Reporting Details (check all that apply):

Ordering EMPLOYMENT SCREENING:

- We will order screening via the LABORCHEX website
- We will FAX orders
- We will Mail orders

Receiving/Reviewing EMPLOYMENT SCREENING Results:

- We will check the website
- Email results to persons indicated below
- FAX results to persons indicated below
- ** CALL before FAXing

Please send invoices via: email regular mail

Employment Screening Contacts:

Name of person(s) who can **Submit Orders AND Receive Results:**

Name: _____ Email: _____ Phone: _____ FAX: _____

Order Receive Results Both

Name: _____ Email: _____ Phone: _____ FAX: _____

Order Receive Results Both

Name: _____ Email: _____ Phone: _____ FAX: _____

Order Receive Results Both

Name: _____ Email: _____ Phone: _____ FAX: _____

Order Receive Results Both

PLEASE INDICATE which representative will inform Laborchex by email or phone when contacts are no longer valid, such as for persons who have changed positions, quit, been dismissed, etc. This designated representative should contact Laborchex with this information so we can eliminate the person's access to our website.

The person who will contact Laborchex with this information is:

(please use a separate sheet to add more contacts)