

**NACI (New Account/Credit Increase) Form**

New Account  Increase to Credit Limit

Date \_\_\_\_\_

<b>Subscriber Information</b>		<b>*** REQUIRED ***</b>
Account Number (if applicable) _____		
Full Legal Name/Business Entity _____		
Doing Business as (DBA) _____		
Attn:/Department (if appropriate) _____		
Street Address _____	Suite/Floor _____	
City _____ State _____ County _____	Zip _____	
Main Business Telephone _____	Fax _____ Country _____	
E-Mail Address _____ Website Address _____		
E-Billing Contact Name _____ E-Mail Address _____		

**Organization Affiliation** (please check if applicable)

\_\_\_\_ Division of \_\_\_\_\_ Subsidiary of \_\_\_\_\_  
\_\_\_\_ Representative of \_\_\_\_\_ Branch of \_\_\_\_\_

**Type of Organization (select *Single Best Option Below*) – REQUIRED if New Account**

<u>Legal (specify)</u>	<u>Government (specify)</u>	<u>Other (specify)</u>
<input type="checkbox"/> Solo Attorney	<input type="checkbox"/> Municipal	<input type="checkbox"/> Sole Proprietor/Commercial
<input type="checkbox"/> Solo Suite	<input type="checkbox"/> County	<input type="checkbox"/> Academic
<input type="checkbox"/> Small Firm/2-20 (# of attys) _____	<input type="checkbox"/> State	<input type="checkbox"/> Corporation
<input type="checkbox"/> Medium Firm/21-79 (# of attys) _____	<input type="checkbox"/> Federal	<input type="checkbox"/> Reseller
<input type="checkbox"/> Large Firm/80 + (# of attys) _____	<input type="checkbox"/> Tribal	<input type="checkbox"/> Legal Association (e.g. bar assoc.)
		<input type="checkbox"/> Non-Legal Association (e.g. NAACP)

If Appropriate: **List Primary Practice Areas:** \_\_\_\_\_

\_\_\_\_ Check to receive important e-mail notifications and special promotions from West. We will not sell, rent or share your information with others.

**CONTACT INFORMATION:**

Active Partner/Officers Names & Titles: (please attach separate sheet if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Accounts Payable Contact:**

**Accounts Payable Telephone Number:**

\_\_\_\_\_  
\_\_\_\_\_

**CREDIT INFORMATION:**

**Legal Business Structure:**

Corporation  Partnership  LLC, LLP, etc.  Individual Business  Other

**Annual Revenue** \_\_\_\_\_ **Years in Business** \_\_\_\_\_

**Date Business Started** \_\_\_\_\_ **Length of Present Ownership** \_\_\_\_\_

**Number of Employees** \_\_\_\_\_