

BUSINESS ACCOUNT APPLICATION

Internal Use Only	Account #:	CSR ID:	Date:
Section 1: APPLICANT INFORMATION			
Company Name:			
PRIMARY CONTACT: Last Name:		First Name:	Title:
SECONDARY CONTACT: Last Name:		First Name:	Title:
Mailing Address:		City:	County: State: Zip Code:
Business Phone: () ()	Fax Number: () ()	E-Mail Address:	
Account Statement Delivery Method (select one)		Other Correspondence Delivery (select one)	
<input type="checkbox"/> Email-Monthly (Free)	<input type="checkbox"/> View Online	<input type="checkbox"/> US Mail-Quarterly (\$5.00 fee)	<input type="checkbox"/> E-Mail (Must enter e-mail address above) <input type="checkbox"/> U.S. Mail
Challenge Question			
Please select <u>one</u> of the following questions by placing an "x" in the box and provide the answer in the space to the right. The challenge question is used for verification purposes when accessing your account.			
<input type="checkbox"/> What is the name of your first elementary school?	<input type="checkbox"/> What city were you born in?	Challenge Question Answer	
<input type="checkbox"/> What is your mother's maiden name?	<input type="checkbox"/> What is the name of your first pet?		
Personal Identification Number (PIN)			
You must provide a four-digit PIN to access your account using the automated telephone system.			Retain for your records

Section 2: AGREEMENT TO TERMS AND CONDITIONS
Completion of this application, receipt of Transponder(s), pre toll payment and signature below constitutes the AGREEMENT subject to the attached Terms and Conditions. By signing below I agree to comply with the Terms and Conditions established for the use of NC Quick Pass. I have read, understand and agree to abide by the Terms and Conditions. I agree to be responsible for all Transponder(s) listed on this account. I certify that the information provided on this application is accurate and current. I am at least 18 years of age.
Authorized Signature Required: _____ Date: _____

I understand that any outstanding balance for tolls, fees, and penalties due for prior travel as part of any Bill by Mail invoice in my name must be paid <u>prior</u> to establishment of an NC Quick Pass Account. (Choose one below)
<input type="checkbox"/> I authorize NC Quick Pass to charge the credit/debit card listed below for additional charges associated with outstanding Bill by Mail invoices up to _____ dollars. I understand I will not receive notice of this charge in advance.
<input type="checkbox"/> I do not authorize any additional charges. Please contact me by phone at _____ to discuss payment of any outstanding balances.
Authorized Signature Required: _____ Date: _____

Section 3: TRANSPONDER & VEHICLE INFORMATION	
Part 1 – Transponder Information	
Type	Transponder Description
NC Quick Pass	This small transponder affixes to the inside of the vehicle windshield under the rear view mirror. Once installed, it cannot be removed without damage to the transponder. The NC Quick Pass transponder can be used on toll facilities that accept NC Quick Pass, SunPass and Peach Pass .
NC Quick Pass E-ZPass	This hard case transponder affixes to the inside of the vehicle windshield under the rear view mirror with velcro strips. The NC Quick Pass E-ZPass transponder can be used on toll facilities that accept NC Quick Pass, E-ZPass, SunPass and Peach Pass .
Exterior	This Exterior transponder is required for vehicle windshields that do not allow detection of an interior transponder. The transponder affixes to the vehicle's front bumper. A complete list of vehicles that require this type of transponder is provided on the NC Quick Pass website. The Exterior transponder can be used on toll facilities that accept NC Quick Pass, E-ZPass, SunPass and Peach Pass .

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Part 2 – Vehicle Information & Transponder Selection

License Plate Number	State	No. of Axles	Year	Make	Model	Place an X under the type of NC Quick Pass transponder you are requesting for each vehicle.		
						NC Quick Pass \$0.00	NC Quick Pass E-ZPass \$7.40	Exterior \$13.49
For more than 25 vehicles, you may complete the application online at www.ncquickpass.com or contact the Customer Service Center at 1-877-7MY-PASS.					Subtotal (Transfer to Section 4 Part 1)			

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Section 4: PAYMENT

Part 1 – Payment Calculation (Fill in Number of Transponders based on completion of page 2.)

	NC Quick Pass	NC Quick Pass E-ZPass	Exterior
Total Transponders by Type			
Transponder Price (each)	\$0.00	\$7.40	\$13.49
TOTAL PRICE for each column	\$ -	\$	\$
North Carolina state sales tax of 4.75% plus discretionary county sales tax* <small>Please verify the sales tax rate for your county at: http://www.dor.state.nc.us/taxes/sales/taxrates.html</small>	\$ -	\$	\$
Total Transponder Cost (Add the total cost for each type of transponder)	\$		
Amount for Pre-Paid Tolls**	\$		
Total Due	\$		

*Sales tax rates are to include North Carolina state sales tax of 4.75% plus county discretionary sales tax for the county listed under Section 1: APPLICANT INFORMATION.

**Twenty dollars (\$20) for each transponder is required.

Your NC Quick Pass account will be evaluated after the first 30 days and then quarterly to determine your average monthly toll usage. If your current monthly replenishment amount requires adjustment, you will be notified by the communication delivery method you selected.

Part 2 – Replenishment Method (must select one)

Automatic Replenishment (Credit or Debit Card)

Automatic replenishment is the **quickest and easiest** way to maintain your NC Quick Pass account. By selecting the automatic replenishment method, you authorize NC Quick Pass to maintain your credit or debit card on file. Additionally, you authorize NC Quick Pass to charge your credit or debit card when your pre-paid toll balance is 25% of your replenishment threshold. See Section 7 of the Terms and Conditions for replenishment amounts.

Manual Replenishment (Credit/Debit Card, Check, Money Order or Cash)

Manual replenishment requires you to monitor and replenish your account when your pre-paid toll balance is approximately 50% of your threshold amount. This option allows you to replenish your pre-paid account by making a payment at www.ncquickpass.com through our automated phone system at 1-877-7MY-PASS, by mailing a check payable to NC Quick Pass to the Customer Service Center at 200 Sorrell Grove Church Road, Suite A, Morrisville, NC 27560, or in person at the Customer Service Center. **DO NOT MAIL CASH.**

Part 3 – Total Payment Due

Total Payment Due **Select one:** Credit/Debit Card Cash/Check/Money Order
 From Section 4 Part 1

Section 1: Credit/Debit Card

Credit Card Type: Visa Master Card Amex Discover

To include a secondary credit card on your account
 Click the 'Manage Your Account' tab on the website below
www.ncquickpass.com.

Credit Card Number:

Expiration Date: / Billing Zip Code:

Print name as it appears on card: _____

I authorize NC Quick Pass to charge the credit or debit card identified on this application for the charges required to open and replenish an NC Quick Pass account.

Cardholder's Signature Required: _____ **Date:** _____

Section 2: Cash /Check/Money Order

Please make all checks payable to: **NC Quick Pass**

Check Number: _____ Total Amount on Check: _____ Date: _____

All cash payments must be hand delivered directly to the NC Quick Pass Customer Service Center.

Completed applications can be submitted to the NC Quick Pass Customer Service Center using the following methods:

By FAX: 1-919-388-3279.

By Mail: 200 Sorrell Grove Church Road, Suite A, Morrisville, NC 27560. Do NOT mail cash.

In Person: 9 am-5 pm Monday-Friday, 9 am-2 pm Saturday, 200 Sorrell Grove Church Road, Suite A, Morrisville, NC 27560.