CHARGE ACCOUNT APPLICATION

The following customer applies for a charge account with the Clerk of Court, Parish of Webster, for the extension of charge privileges for the purpose of charging recording fees, copy fees and other authorized fees.

DESIRED ACCOUNT NAME:_____

NAME _____ _____
First Last

EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

BANK _____

BANK ADDRESS _____

BANK TELEPHONE _____

Other Clerk's Offices where you have a charge account:

_____

_____

_____

I_____ the above named customer, do personally guarantee to the Clerk of Court, payment in full, plus all interest, fees and cost owed under the terms of foregoing agreement; such guarantee shall remain in force until its revocation is acknowledged in writing by the Clerk of Court

Signed:_____ Date: _____

Guarantor's Name: _____

Guarantor's Address:_____

Guarantor's Telephone: _____

Return form to: Webster Parish Clerk of Court
P.O. Box 370
Minden, La. 71058-0370

COPY OF PHOTO ID REQUIRED WITH APPLICATION