



Construction Collection Specialists, Inc.

Customer Oriented • Integrity Based

Assignment of Account

Client Information

Client Name: _____ Date: _____

Authorized Representative: _____
Print Name Signature

Phone: _____ Email: _____

Debtor Information

(Disregard Address, etc., if information is attached)

Debtor Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Phone No.: _____

Contact: _____ Phone No.: _____

Cust. Ref. No.: _____ Email addresses: _____

Amount Outstanding

Amount owing: \$ _____

Date of last payment: ____/____/____

Last payment amount: \$ _____

Back-up/Copies Enclosed

(Indicate a check mark by all that apply)

- ____ Credit Application
- ____ Statement of Account
- ____ Unpaid Invoices/Contracts
- ____ Conversation Notes
- ____ Mechanic's Liens/Bond Claims
- ____ NSF Checks
- ____ Personal Guarantees
- ____ Promissory Notes

Additional Comments
