

Service Agreement

Package Includes

- Live Receptionist Call Handling
- Custom Call Tree
- One Extension
- Phones covered 9am-5pm EST Monday-Friday
- Up to 100 Inbound Calls involving the Receptionist
- Unlimited talk time (talk as long as you'd like after a call is transferred)
- Month-to-month agreement

*"Your Professional Image
is Our Business"*

LIVEANSWER
RECEPTIONIST.COM

Call 888.404.9634
LIVEANSWERRECEPTIONIST.COM
Please fax completed forms to
Fax 407-459-8746

Agreement Date _____

Office Use

PC _____

IC _____

DID _____

Live Receptionist Package Only \$145.00

Premium Add-on Services

Setup Fee Monthly Fee

\$149.00 \$145.00

Quantity Monthly Fee

Additional People – 1 (one) Individual Call Management per person (\$20.00)		
Voicemail – 1 (one) voicemail box (\$10.00)		
Additional Toll-Free or Local Number – Number may be published or forwarded (\$20.00)		
Extra Inbound Calls – Additional inbound calls involving your Live Answer Receptionist (1.45)		
Calendaring and Scheduling – A dedicated Live Answer Receptionist will be responsible for maintaining for one personal calendar (\$50.00)		
	Monthly Fee	
	Partial Month	
	Setup Fee	149.00
	1 st Month Fee, + Setup	

Subscriber Information

Contact Name _____

Business Name _____

Address _____

Suite _____ City _____

State _____ Zip _____

Primary Phone _____ Fax _____

Alternate Phone _____

Email Address _____

Subscriber Company Information

Company Name _____ Contact Name _____
Company Type _____ Main contact number _____
Alt. Phone _____ Fax Number _____
Primary Email _____
Company Website _____
Job Title _____

Provisioning Information

Please provide a brief company profile, so that our agents have the information on-hand when a caller asks:

DID (Virtual number) will be (check one): Forwarded to ☐ Published ☐

Answer my calls in the following company script: _____

List the people who will be using the service including contact numbers, and emails:

	NAME	Contact Number	Email Address	Include VM Box?
1.	_____	_____	_____	Yes No
2.	_____	_____	_____	Yes No
3.	_____	_____	_____	Yes No
4.	_____	_____	_____	Yes No

Subscriber Signature

Date _____

Make additional copies of this page for each employee Live Answer Receptionist will be answering calls for.

Telephone Call Instructions for _____ ← Name

When a call comes in for me (check all that apply):

- ☐ a. Always try to reach me before taking a message. ☐ b. Always take a written message (or voicemail).

Phone No. 1 _____

- ☐ c. Time or meeting specific message/voicemail

Phone No. 2 _____

Complete Phone Numbers for Answer a.

Phone No. 3 _____

Message Instructions _____ ← Name

When you are unavailable to take your calls (Check each that apply):

- ☐ a. Take a manual Message

Send messages to (check one):

Email ☐ SMS ☐

- ☐ b. When the caller requests to be transferred to voicemail.

Notify me by (check all that apply):

☐ Email ☐ SMS Who is your Cellphone Service Provider? _____

☐ Voice Notification

OPTIONAL CALL MANAGEMENT INSTRUCTIONS

Directions to your location (if needed). Please include landmarks, color of building, etc:

Please list the Five Most Commonly Asked Questions and Answers that your callers may need:

Is there a leading question that your Live Answer Receptionist can ask your caller that would assist in handling your calls?
(Example: What is the call in reference to?)

How would you like your Live Answer Receptionist to handle calls from Wholesalers or Solicitation calls?

Are there any times during business hours that you are generally unavailable to receive calls? (Example: Travel days, meetings, vacations)

Is there a time of day that you would like us to tell your callers that they can expect to receive a return call from you or your company? (Example: You return all calls after 2pm)

Please provide any additional information that you feel is important for your Live Answer Receptionist to better assist you.

Subscriber Signature

Printed Name: _____

Date: _____

Credit Card Authorization

Company Name: _____

I wish to pay by credit card until I revoke authorization in writing with 30 days notice:

Card # _____

Expires (MM/YY) _____ 3-digit Security Code _____

Please circle one: Visa M/Card AMEX

Name (on card) _____

Address _____

City _____ State _____ ZIP _____

Disclaimer: In Signing you acknowledge that You have read and agreed to the LiveAnswerReceptionist Standard Terms and Conditions (LiveAnswerReceptionist.com/tandc.pdf)

Subscriber Signature

_____ Date _____