

COOS COUNTY REGISTRY OF DEEDS
55 SCHOOL STREET, SUITE 103
LANCASTER, NH 03584
603-788-2392
www.nhdeeds.org

COPY ACCOUNT POLICY

Copy accounts are a courtesy and privilege we offer to individuals and companies who would like to print documents recorded with the Coos County Registry of Deeds. Please refer to the copy fee schedule on our website www.nhdeeds.org. We will be using Laredo as the new search program. There will be a \$10.00 / month subscription fee and the prints are \$2.00 per page (as opposed to the old rate of \$3.00 per page). There is a \$25.00 one-time set-up fee for **new** Accounts.

Copy accounts will be invoiced monthly via email and must be paid in full within 10 days of receipt. You will also be able to view a detailed invoice when you have signed up and into the Laredo Connect program. Invoices that remain past due for 30 days are subject to being suspended without notice until the balance is paid in full. Three late payments will result in the account being permanently closed. There will be a \$35.00 reactivation fee to reopen accounts that are closed. We do not accept credit/debit payments. Checks returned from the bank for insufficient funds will incur a \$25.00 fee. The Registry is not responsible for errors made by the account holder when printing (i.e. duplicate or incorrect prints, equipment failure when printing online, etc.) We will not issue refunds.

It is your responsibility to notify this office immediately, in writing, of any changes made within your organization that may affect this account, i.e.: Organization's name change, change in address, contact person, email, telephone numbers, etc.

If you have an existing Registry copy account, please use your existing account number and password. If you are opening a new account, we will assign you an account number and password. We will email you this information when the account has been opened. This information is necessary to log in and ensure proper usage of the account. It is your responsibility to provide your password to any individuals who you will allow to charge copies to your account. This office will not disclose account numbers or passwords to anyone except to the authorized account holder upon presenting proper identification.

I hereby acknowledge receipt of the copy account policy and agree to its terms.

Signature of Applicant

Witness signature

Printed Name of Applicant

Printed Name of Witness

Company Name

DATE: _____

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COPY ACCOUNT APPLICATION

Date: _____ Account # _____

Password _____

NAME: _____

FIRM NAME: _____

ADDRESS: _____

TELEPHONE: _____ - _____ - _____

E-MAIL for monthly invoices _____

(To avoid errors please **TYPE** e-mail address)

CONTACT PERSON(S) if other than person opening account:

I hereby give authorization for a copy account to be opened at the Coos County Registry of Deeds. I agree to the terms and conditions of the copy account policy. I understand that payment in full shall be made to the Registry **within 10 days of billing** or my account will be blocked. Three late payments will result in my account being closed.

Signature of Applicant

Please print Name

Authorized Signature for Above Firm

Please print Name

SSN or TAX ID # _____

Please remit a photo copy of the driver's license of person responsible for account.

If a business entity, also include a copy of a certificate of good standing.

\$25.00 set-up fee enclosed? _____ (new accounts only)

We will E-MAIL your account number and password to you when the account has been opened.