NCDA&CS Agronomic Division
Escrow Account for Sample Payment

Escrow Account
An escrow account can be created in the name of any client (grower, consultant, etc.) to pay for sample fees. NCCES offices are also welcome to set up escrow accounts. The account serves as a holding place for the client’s money. When the client becomes obligated for fees upon completion of requested sample analysis, money will be withdrawn from the escrow account to pay the invoice. By establishing and maintaining a balance in an escrow account, the client is assured that sample reports are released as soon as the laboratory results and recommendations are ready. An escrow account can only be used to pay for sample analysis done by the NCDA&CS Agronomic Division.

How to Establish an Escrow Account
An escrow account can be created by completing the NCDA&CS Escrow Account Establishment form and submitting it to NCDA&CS along with a check for the initial deposit into the account.

Alternatively, a client can call the Agronomic Division at 919-733-2655 to establish an escrow account. The caller will need to be prepared to provide the same identifying information as is collected on the NCDA&CS Escrow Account Establishment form. The caller can either give a credit card number for the initial deposit or a check can be mailed.

An escrow account will be established in the client’s name once the initial deposit is received.

Escrow Account Statements
Monthly escrow account statements will be mailed to clients upon request. The monthly statement will allow clients to cross reference escrow withdrawals with sample report numbers and fees.
ESCROW ACCOUNT ESTABLISHMENT

This form is to be used for the establishment of an Escrow Account with the NCDA&CS Agronomic Division. This account will only be available for the processing of samples submitted to this facility. To establish an account, please provide the following information:

*NAME: ______________________________________________________________

*ESCROW ACCOUNT NAME: ____________________________________________

*ADDRESS: ____________________________________________________________

*CITY: ___________________________  STATE: _____  *ZIP CODE: __________

*CONTACT PERSON: ____________________________________________________

*PHONE: ______________________________________________________________

E-MAIL ADDRESS: ______________________________________________________

DEPOSIT AMOUNT: _____________________________________________________

________________________   _______________________ ______________
DATE           *SIGNATURE OF RESPONSIBLE PARTY

THE ABOVE TRANSACTION IS CONFIDENTIAL AND SHALL BE USED ONLY FOR THE PURPOSE FOR WHICH ISSUED TO NCDA&CS AGRONOMIC DIVISION