



**ATTACHMENT A**  
**CHAMBER SEAL/CERTIFICATE OF ORIGIN**  
**DOCUMENTS PROGRAM APPLICATION**

We wish to join the Certification of Export Documents program at the Nashville Area Chamber of Commerce. We have read the Rules & Procedures Documents and understand and accept the policies therein.

Date: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Primary Company Representative: \_\_\_\_\_  
The person responsible for submitting packets. (Name & Title)  
Representative's Signature: \_\_\_\_\_  
Representative Email: \_\_\_\_\_

Alternate Representative: \_\_\_\_\_  
(Name & Title)  
Alternate's Signature: \_\_\_\_\_  
Alternate's Email: \_\_\_\_\_  
Please attach separate sheet for additional Alternates.

NACC Member ID #: \_\_\_\_\_

\_\_\_\_ Business Advocate Member \$15/Seal  
\_\_\_\_ Market Mover Member and above \$10/Seal  
All fees will be billed monthly, payable in 15 days.

We, the Company, understand that this amount does not include courier service and we are solely responsible for the pick-up and drop-off of documents. We also understand that NACC does not guarantee immediate turnaround for walk-in customers.

**Please make a copy of this application and Letter of Indemnity on Company letterhead for your files and return both signed originals to Chamber Seal Program Nashville Area Chamber of Commerce. If you have any questions, please call Valerie Johnston at 615-743-3172.**

Nashville Area Chamber of Commerce · 211 Commerce Street, Ste. 100 · Nashville, TN 37201

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**OFFICE USE ONLY**

Membership valid from \_\_\_\_\_ to \_\_\_\_\_  
Chamber staff assignment \_\_\_\_\_