For questions or to submit your completed form please contact sales@commport.com. For the latest form please go to www.commport.com/downloads

Request Information

Requested By	Please provide your name.	Technical Contact Name	If the technical contact is different, please provide their name.
Company Name	Please provide your company name.	Technical Contact Phone	Please provide technical contact's phone number.
Requested Completion Date	Date you would like the setup completed by.	Technical Contact Email	Please provide technical contact's email address.

Routes to be Created:

My Information				Trading Partner Information						
Qual*	ISA ID*	GS ID	Directory	Name*	Qual*	ISA ID*	GS ID	VAN*	Direction*	Confirmed*
									Both	
									Both	
									Both	
									Both	
									Both	
									Both	

* Required   +Commport use only

Trading Partner EDI Contact Details (Please provide if Commport is to co-ordinate end-to-end testing)

Company Name	Contact Name	Email	Phone	Address, City, Province / State, Postal / ZIP	Transaction Standard

Other Information (Optional)

AS2 / FTP Details	Click here to provide any AS2 or FTP communication information that may be required as a part of this setup.
Special Instructions/Notes	Click here to provide any additional details you would like to include.