Lab Pro Inc. 1290 Anvilwood Court Sunnyvale, CA 94089 P: (408) 745-0222 F: (408) 745-7462 www.LabProInc.com sales@labproinc.com



## Application for Credit Company Name: Billing Address: Company Name: Shipping Address: Phone: Fax: Purchasing Agent: rchasing Agent: Agent's Phone: Others authorized to purchase for company: Accounts Payable Contact(s): Phone: Fax: Date Company Established: D&B Number: Resale Certificate # (Attach copy): Fed. ID: **BANK REFERENCES** Checking Acct. #: Savings Acct. #: Contact:

Phone:

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TRADE REFERENCES Name		
Address:		
Phone:		
Fax:		
Name		
Address:		
Phone:		
Fax:		
Name		
Address:		
Phone:		
Fax:		
Name		
Address:		
Phone:		
Fax:		
•		
ACCOUNT TERMS: NET 30 DAYS and F.O.B. Sunnyvale, CA ALL UNPAID BALANCES OVER 30 DAYS SUBJECT TO INTEREST CHARGES OF 2.0% PER MONTH (24% per year)		
Acknowledgement Required (Signature of Authorized Person):		
	Print Name & Title	

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To our prospective new Net-30 Customers,

Please provide a current, monitored email address for your company's Accounts Payable person responsible for your Lab Pro account. To better serve our valued customers, we ask that you include the contact information of the individuals or departments that will use your Lab Pro account.

Accounts Payable	
Name:	
Email:	
Phone:	
Purchasing	
Name:	
Email:	
Phone:	
Receiving	
Name:	
Email:	
Phone:	
Lab/Engineering	
Name:	
Email:	
Phone:	
Oth or Combook	
Other Contact	
Name:	
Email:	
Phone:	