



LABORATORY TESTING INC.

2331 Topaz Drive, Hatfield, PA 19440
Phone: 800-219-9095 ♦ Fax: 800-219-9096

Customer Information Form

Date _____

New Customer _____

Existing Customer _____

BUSINESS INFORMATION

Business Name _____ dba _____

Billing Address _____

Shipping Address (if different) _____

Phone # _____ Fax # _____ E-Mail _____

Type of Business: Corporation _____ Partnership _____ Sole Proprietorship _____ LLC _____

EIN _____ DUNS # _____

Date Business Established _____ Purchase Orders? Yes _____ No _____

Has your company ever filed for bankruptcy? Yes _____ No _____ If Yes, when? _____

Expected purchases \$ _____ Mo / Yr

Name(s) of Principal(s)

1) _____ Title _____

2) _____ Title _____

3) _____ Title _____

In an effort to become more eco-friendly. LTI has gone paperless. We email or fax invoices and statements to our customers, which also helps ensure that they are delivered without delay and to the right people.

Please list the Primary Person to receive:

Invoice & Statement E-mail FAX Mail

Name _____ Title _____

Phone _____ Fax _____

Email _____

Certifications E-mail FAX Mail

Name _____ Title _____

Phone _____ Fax _____

Email _____

Authorized Signature

Date

Printed Name

Title