Teslab Scientific
Scientific Lab Supplies

www.teslabscientific.com info@teslabscientific.com
Phone: 1-438-788-1007
Fax: 1-438-788-1150

Credit application form

Please complete the following form and return by email to: sales@teslabscientific.com

Company name : _____

BILLING ADDRESS	SHIPPING ADDRESS
Address : _____	Address : _____
_____	_____
City : _____	City : _____
Province : _____ Postal code : _____	Province : _____ Postal code: _____
Phone : _____ Fax : _____	Phone : _____ Fax : _____
Account payable contact : _____	Purchasing contact : _____
Email : _____	Email : _____

Years in operation : _____ No. Employees : _____ Est. Monthly Purchases : _____

Our terms are net 30 days.
Our shipping terms are FOB origin, freight prepaid and charged back (we use UPS and Fedex as our carrier)
Interest is charged on accounts 30 days past due at a rate of 1.5% per month.

BANK REFERENCE	BUSINESS REFERENCE #1
Bank : _____	Supplier : _____
Branch : _____	Address : _____
Phone : _____ Fax : _____	Phone : _____ Fax : _____
Account # : _____	Contact : _____

BUSINESS REFERENCE #2	BUSINESS REFERENCE #3
Supplier : _____	Supplier : _____
Address : _____	Address : _____
Phone : _____ Fax : _____	Phone : _____ Fax : _____
Contact : _____	Contact : _____

The undersigned certifies that all information in this credit application is complete, factual and correct, and understands the supplier will rely on the accuracy of this information for any credit that may be extended. Supplier is hereby expressly authorized to contact any parties listed herein and to verify any information contained in this credit application.

Name : _____ Title : _____

Signature : _____ Date : _____

Send Save Print