



## NEW ACCOUNT APPLICATION

### BILL TO

COMPANY/INSTITUTION NAME

NAME/ATTENTION

ADDRESS

CITY  STATE  ZIP

TELEPHONE  FAX

### SHIP TO

COMPANY/INSTITUTION NAME

DEPARTMENT

NAME/ATTENTION

ADDRESS

CITY  STATE  ZIP

TELEPHONE  FAX

### ACCOUNT CLASSIFICATION

EDUCATION  HOSPITAL/CLINICAL  DEALER/RESELLER  INDUSTRIAL

### TYPE OF BUSINESS

SOLE PROPRIETOR  PARTNERSHIP  CORPORATION  LLC  OTHER

### TAX INFORMATION

WILL THIS BE TAX EXEMPT?  NO  YES/ TAX EXEMPTION NUMBER

**IF THE ACCOUNT IS TAX EXEMPT, A COPY OF A SIGNED TAX EXEMPTION FORM MUST BE ATTACHED TO THIS APPLICATION.**

### PRINCIPAL INVESTIGATOR/CONTACT

NAME  TITLE

ADDRESS

CITY  STATE  ZIP

TELEPHONE  E-MAIL

### BANK REFERENCE

BANK NAME  ACCOUNT NUMBER   
 ADDRESS   
 CITY  STATE  ZIP   
 OFFICER  TELEPHONE

**TRADE REFERENCE #1**

NAME  ACCOUNT NUMBER   
 CONTACT  TELEPHONE   
 ADDRESS   
 CITY  STATE  ZIP

**TRADE REFERENCE #2**

NAME  ACCOUNT NUMBER   
 CONTACT  TELEPHONE   
 ADDRESS   
 CITY  STATE  ZIP

**MSDS/SAFETY OFFICER**

NAME  TELEPHONE   
 ADDRESS   
 CITY  STATE  ZIP

**PLEASE FAX COMPLETED APPLICATION TO 314-997-2422  
 IF YOU HAVE ANY QUESTIONS OR NEED ASSISTANCE, PLEASE CALL CUSTOMER  
 SERVICE AT 314-971-3128**

TERMS OF PAYMENT ARE NET 30 DAYS FROM THE DATE OF THE INVOICE, FOB SHIPPING POINT. BALANCES UNPAID BEYOND TERMS MAY BE SUBJECT TO A 2 % SERVICE CHARGE PER MONTH. THE UNDERSIGNED PURCHASER AGREES TO ASSUME RESPONSIBILITY FOR ANY LEGAL OR THIRD PARTY COSTS INVOLVED IN COLLECTION, AND AGREES TO NOTIFY MEDIOMICS, LLC OF ANY CHANGE IN OWNERSHIP. THE PURCHASER AGREES TO BE LIABLE FOR ALL PURCHASES SHOULD THE UNDERSIGNED FAIL TO COMPLY WITH SAID NOTIFICATION. THE UNDERSIGNED AGREES TO RELEASE CREDIT INFORMATION TO MEDIOMICS, LLC. IT IS UNDERSTOOD THAT THE INFORMATION WILL BE HELD IN STRICT CONFIDENCE AND IS FOR THE SOLE PURPOSE OF EXTENDING CREDIT OR UPDATING EXISTING CREDIT FILES.

**PURCHASER:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**OFFICE USE ONLY**

DATE: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

CREDIT LIMIT: \_\_\_\_\_

