

NEW ACCOUNT INFORMATION SHEET

FOR BRANCH USE ONLY:
Branch Number: _____ Division Number: _____
Project Manager: _____
Project size in actual dollars: _____
Estimated start date: _____
Estimated completion date: _____

FOR CORPORATE USE ONLY:
Client Number: _____
Date: _____
Credit Limit: _____

COMPANY INFORMATION

Company: _____ Type of Business: _____

address	City	State	Zip
billing address (if different than above)	City	State	Zip

Phone Number: (____) _____ Fax: (____) _____

Contact (person authorized to release payment on invoice): _____

MO/YEAR BUSINESS WAS ESTABLISHED: _____
FEDERAL ID #: _____ DUNS #: _____
() CORPORATE () PROPRIETORSHIP () PARTNERSHIP PURCHASE ORDERS REQUIRED FOR PAYMENT: () YES () NO
PAYMENT PROCESSING CYCLE:
WILL YOU REQUIRE EXTENDED TERMS BEYOND HYGEIA LABORATORIES INC. NORMAL net 30 DAYS TERMS? () YES () NO
IF YES, PLEASE LIST NAME AND PHONE NUMBER OF THE PERSON WHO CAN MAKE PAYMENT ARRANGEMENTS:
Name: _____ Phone Number: (____) _____

NAMES OF OWNERS, PARTNERS OR OFFICERS:

Name	Title			Phone Number: (____) _____
Address	City	State	Zip	
Name	Title			Phone Number: (____) _____
Address	City	State	Zip	

BANK REFERENCES:

Name of Bank: _____ Branch: _____
Address _____ City _____ State _____ Zip _____
Phone Number: (____) _____
Name of Bank Representative: _____
() Checking () Savings () Loan
Account #: _____ Account #: _____ Account #: _____
How is loan secured?: _____

TRADE REFERENCES:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Signature: _____ **Date:** _____

THIS CREDIT INFORMATION FORM MUST BE SIGNED BY A CORPORATE OFFICER, A PRINCIPAL, A GENERAL PARTNER, OR OTHER PERSON AUTHORIZED TO BIND THE COMPANY.
BY SIGNING THE ABOVE THE FIRM AGREES"
1. THAT ALL INFORMATION ON THE FORM IS TRUE.
2. THAT HYGEIA LABORATORIES INC. MAY VERIFY THE ABOVE INFORMATION AND RESEARCH THE COMPANIES CREDIT HISTORY.
3. TO PAY EACH INVOICE WITHIN THIRTY (30) DAYS
4. TO PAY A 1.5% SERVICE CHARGE PER MONTH ON ANY INVOICE THIRTY (30) DAYS OR OLDER.
5. TO PAY COLLECTION COSTS AND ATTORNEY'S FEES IN THE EVENT THAT COLLECTION EFFORTS BECOME NECESSARY..