



Credit Application

Section I - General Information

Applicant's Legal Name: _____

Organization: _____

Shipping Address: _____

City State Zip Code

Telephone: _____ Fax: _____ Email: _____

Section II - Financial Information

Business Type: Proprietorship Partnership (S) Corp (C) Corp Other _____

Federal Tax I.D. # _____ State I.D. # _____ State: _____

DUN & Bradstreet # _____ Business Purpose: _____

Tax exempt? Yes No If yes, Tax-Exempt # _____

Do you now or have you ever done business under another name? Yes No

If yes, what name? _____

List company proprietor, partners, or officers of applicant:

NAME	TITLE	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____

How long has business been under current ownership? _____

Year business started: _____ Number of employees: _____

Section III - Billing Information

Person to contact regarding purchase orders and invoice payments:

Name: _____ Title: _____

Address: _____

City State Zip Code

Telephone: _____ Fax: _____ Email: _____

Any restriction or special instructions regarding account? _____

Section IV - References

Financial Institution: _____ Account Number: _____

Name of Contact: _____

Address: _____

City

State

Zip Code

Telephone: _____ Fax: _____ Email: _____

Credit References:

Company: _____ Contact: _____

Address: _____

City

State

Zip Code

Telephone: _____ Fax: _____ Email: _____

Company: _____ Contact: _____

Address: _____

City

State

Zip Code

Telephone: _____ Fax: _____ Email: _____

Company: _____ Contact: _____

Address: _____

City

State

Zip Code

Telephone: _____ Fax: _____ Email: _____

Section V - Authorized Signature

These answers are accurate to the best of my knowledge. I hereby agree to Xeno Diagnostics, LLC open account terms of net 30 days.

Printed Name

Title

Signature

Date