

New Customer Set Up Form

Company Name:										
Primary Contact:										
Company Address:										
Contact Tel:				Contac	ct e-					
Accounts Information										
Accounts Contact:										
Accounts Address:										
Accounts Tel:	Contact Fax:									
E-mail for invoices:				гах.						
E-mail for statements:										
E-mail for reminders:										
	000				Т.,	00				
Currency: VAT No. (required for	GBP	E	ıro		U	SD				
all EU customers)										
Company Registration Number										
Analytical Result Distribution Note:										
Hard copies of Certificates of	Analysis (C of	f As) will be	autom	atically p	osted t	o the spe	ecified add	Iress.		
Contact (s) for C of A distribution										
Contact Address:										
Contact Tel:										
Contact Fax:										
Contact E-mail (s):										
Preferred communication route (Please tick):	e-mail			Fax	Fax			Post		
Office use only										
Credit Check Required (please circle)			Yes / No		Credit Limit (in GBP)					
Stat code									•	