



# U.S. Micro-Solutions, Inc.

## New Customer Credit Application

Form must be completed in full for consideration.

Company \_\_\_\_\_

Principal Name \_\_\_\_\_

Title \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Billing Address if Different From Above:

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Billing Contact \_\_\_\_\_

Phone (if different from above) \_\_\_\_\_

List Employees with Authority to Make Decisions on Your Account:

Tax I.D. Number (or SS# for individuals) \_\_\_\_\_ D & B Number \_\_\_\_\_

Major Credit Card (Visa/Master Card) # \_\_\_\_\_ exp \_\_\_\_\_

Name on Card \_\_\_\_\_

Customers requesting credit must register a valid Master Card or Visa number with U.S. Micro-Solutions, Inc. Credit card numbers are kept on-site, in a secure location with limited access. Credit cards are billed for first analysis and once credit is granted will not be billed for any future analysis unless requested by the customer or in cases of lapse in payment exceeding terms in our lab services policy. USMS credit terms are due on receipt and customers are required to pay invoices in a timely manner. Failure to pay invoice in a timely manner will result in credit card being billed for analysis.

Please List Three Credit References:

Contact	Company	City	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*The undersigned acknowledges that he/she is an agent of the company listed above and has completed this record with current, accurate information, as was available at the time of completion. Furthermore, the agent authorizes U.S. Micro-Solutions, Inc. their agent or assignee to complete a credit check for the extension of a line of credit which will include contact with listed references and computer credit clearance through Experian, Dun & Bradstreet or other data source. Completion of this form does not guarantee that credit will be offered by U.S. Micro-Solutions, Inc.*

Agent of Company Requesting Credit \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of Person on Credit Card Submitted \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_