



Please provide the information requested below. Once completed, send it to customercare@laballey.com.

The information you provide shall remain strictly confidential and shall not be leased or sold or be used for any other purpose other than the intended use of your submission.

(*) Mandatory fields

Contact Info

First Name*	Last Name*	Position/Title*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number*	Email Address*	Lab Alley Employee Contact
<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Authorized Purchasers

Need To Add More Authorized Purchasers?

Name	Email	Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Company Info

Company Name*	State/Province*	Industry*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address*	Suite/Unit Number	Country*
<input type="text"/>	<input type="text"/>	<input type="text"/>
City*		Zip Code*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Business Phone Number*	Business Website*	Number of Employees*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Company Type (ie. sole proprietorship, LLC., corporation, non-profit, etc.) *		
<input type="text"/>		

Financial Info

Federal Tax ID*	Dun & Bradstreet #*	State Incorporated*	Years since Incorporation*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Company Valuation \$USD	Request Credit Amount (\$)*	Tax Exempt?*	If Yes, provide your Tax Exemption ID*
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>
Does your company use a payment portal?*		*Tax exemption certificate must be submitted with credit application*	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If No, provide an Invoicing Email Address			
<input type="text"/>			

Tell us about your business and why you're interested in our products.

Bank Reference

Bank Name*	Phone Number*	Bank Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country*	City*	State/Province*	Zip Code*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Trade Reference

Minimum 3 Trade References Required

Company Name*	Phone Number*	Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country*	City*	State/Province*	Zip Code*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account Age (years)*	Credit Limit*	Email Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Company Name*	Phone Number*	Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country*	City*	State/Province*	Zip Code*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account Age (years)*	Credit Limit*	Email Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Company Name*	Phone Number*	Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country*	City*	State/Province*	Zip Code*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account Age (years)*	Credit Limit*	Email Address*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Signature

Signature*	Today's Date*
<input type="text"/>	<input type="text"/>

* I certify that all information provided in this application and any supporting documents is true, accurate, and complete to the best of my knowledge.

The undersigned confirms that the above information is true and accurate and hereby authorizes Lab Alley, LLC to obtain credit and/or financial information from the bank and references listed above. If given open terms of credit with Lab Alley, LLC., the undersigned promises to pay for all purchases in accordance with those terms. The undersigned guarantees payment of all invoices. If at any time the undersigned is unable to meet its financial obligations with Lab Alley, LLC., the undersigned agrees to pay for legal, court and any other fees necessary to collect unpaid invoices. The undersigned also consents to receive faxes, emails and mailings on behalf of Lab Alley, LLC. .