

RESEARCH LABORATORIES, INC.

6209 DISCOUNT DRIVE, FORT WAYNE, INDIANA 46818 (260) 489-2551 www.ResearchLaboratoriesInc.com

RESEARCH LABORATORIES, INC - NEW ACCOUNT & CREDIT INFORMATION

Company Name: _____

Street Address: _____

City/State/Zip Code: _____

Mailing Address, if different: _____

President: _____ VP: _____

Person responsible for authorizing payment-Name: _____

Title: _____ Dept: _____ Phone: _____ Fax: _____

Subsidiary/Other Company Name(s): _____

Type of Organization (Corp, Partnership, Proprietor): _____

Year Started or Incorp: _____ State: _____ Business Type: _____

IMPORTANT: Tax Exemption # _____ & Please fax W-9 Form.

CREDIT REFERENCES

<u>Bank Name, Address, Acct.</u>	<u>Bank Officer</u>	<u>Phone Number</u>
_____	_____	_____
_____	_____	_____

TRADE REFERENCES

<u>Company Name & Address</u>	<u>Contact Person</u>	<u>Phone Number</u>
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____

Undersigned understands that the above information is given freely to apply for a new account with us. The undersigned, who has complete company authority to do so, gives permission for us to contact any and all of the above in order to verify financial and other information given. (Information will be kept confidential.) Please complete and fax back to: **260-489-9834** (along with signed Agreement to Terms acceptance form).

Authorized Signature for Company Title Date Phone#

Email Address :

Printed Name For Above Signature

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RESEARCH LABORATORIES, INC: AGREEMENT TO TERMS

New account applicants are to complete, sign, and return the AGREEMENT TO TERMS form and the NEW ACCOUNT & CREDIT INFORMATION sheet. It is understood by all parties that information given on the NEW ACCOUNT & CREDIT INFORMATION sheet will be verified before any credit is extended.

Information given is presumed correct and will be kept confidential to the best of our ability.

Pricing: Pricing is subject to change without notice. Clients should verify current pricing for each order placed.

Initial Order: Initial first order is to be prepaid. Analyses processing will not commence until first payment is received and cashed. Incoming test additives/fuels must have a fuel slip request accompanying them with all pertinent information completed.

Credit Terms: If credit terms are approved and extended to a client after the initial order, invoice payment is to be received in our office within NET FIFTEEN (15) days from invoice date.

Past Due Late Charges: After NET FIFTEEN term above, a late charge is applicable and due at the rate of one and one half percent (1 1/2%) per month on the unpaid balance. A client may be placed on a CASH-ONLY basis if the account is Past Due.

Collection Fees: It is understood that if an invoice becomes Past Due and a collection procedure is necessary, the client is responsible for all collection agency costs, attorney fees, court costs and all other costs related to collection of the Past Due invoice amount and applicable late fees. I and my company agree to these fees.

Quantity Discounts: Quantity discount pricing may be offered for specific testing quantities at one time. If less than the quantity discount is received, the quantity discount will not apply. If an account is Past Due, any previous quantity discounts are no longer applicable until the account is deemed in good standing at our discretion.

I understand the above conditions and agree for myself and my company to the above terms.

I am the person responsible for authorizing Agreement to Terms: _____
(print name)

Signature of Person Above: _____ Date: _____

Title: _____ Dept: _____ Phone: _____ Fax: _____

Company Name: _____

Street Address: _____

Email Address : _____

City/State/Zip Code: _____

Mailing Address (if different) _____

Billing Address (if different) _____