



Analytics Corporation
10329 Stony Run Lane
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Tel: (804) 365-3000

ACCOUNT SET - UP FORM

Please fill out form (print clearly if writing manually) and fax to (804) 365-3002 or email to cservice@analyticscorp.com

Company Name _____
Department _____

Billing Address: _____
City: _____ State: _____ Zip Code: _____
Contact: _____
Phone No.: _____
Fax No.: _____
Cell No.: _____
Email: _____

Reporting Address:
City: _____ State: _____ Zip Code: _____
Contact: _____
Phone No.: _____
Fax No.: _____
Cell No.: _____
Email: _____

Shipping Address:
City: _____ State: _____ Zip Code: _____
Contact: _____
Phone No.: _____
Fax No.: _____
Cell No.: _____
Email: _____

PO No. (if required on reports/invoices) _____

- Type of Account
- | | |
|---|--|
| <input type="checkbox"/> Industrial Hygiene | <input type="checkbox"/> Environmental |
| <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Dialysis |
| <input type="checkbox"/> Microbiology Only | <input type="checkbox"/> Asbestos Only |

Special Instructions

How did you hear about Analytics? Referred by:

Submitted By: _____ **Date:** _____

Lab Use
Set Up By: _____ **Date:** _____