



New Customer Profile Form

Please complete this brief profile form so we may serve you better.

Please lab submitting samples to:

- VRL - SAN ANTONIO (Non-Human Primate)
- VRL - MARYLAND (Small Animal)
- VRL - Canada (Small Animal & Non-Human Primate)

Account Code: _____

PRIMARY CUSTOMER CONTACT

Company Name: _____
 ContactName: _____ Email: _____
 Address: _____
 City: _____ State: _____ ZipCode: _____
 Phone: _____ Ext: _____

Purchasing Contact Info

Contact Name: _____ Email: _____
 Title: _____
 Address: _____
 City: _____ State: _____ ZipCode: _____
 Phone: _____ Ext: _____
 Purchase Order Nbr, if available: _____

Billing Contact info/Send Invoices to:

Company Name: _____
 AP Contact Name: _____ Email: _____
 Address: _____
 City: _____ State: _____ ZipCode: _____
 Phone: _____ Ext: _____
 NOTES: _____
 Anticipated Amount of Credit: _____

BILLING INSTRUCTIONS: - Please preferred method of receiving Invoices

- Email** (email address) _____
- Mail** (billing address) _____
- Portal** Contact Name: _____
 Phone: _____ Ext: _____
- Other:** Contact Name: _____
 Phone: _____ Ext: _____

Banking Contact Info

Institute Name: _____
Contact Name: _____ Email: _____
Title: _____
Address: _____
City: _____ State: _____ ZipCode: _____
Phone: _____ Ext: _____
Fax: _____

Trade References:

Contact Name: _____ Email: _____
Title: _____
Address: _____
City: _____ State: _____ ZipCode: _____
Phone: _____ Ext: _____
Fax: _____

Contact Name: _____ Email: _____
Title: _____
Address: _____
City: _____ State: _____ ZipCode: _____
Phone: _____ Ext: _____
Fax: _____

Contact Name: _____ Email: _____
Title: _____
Address: _____
City: _____ State: _____ ZipCode: _____
Phone: _____ Ext: _____
Fax: _____

By submitting this application, you authorize VRL to make inquiries to the business/trade references you have supplied.
The above information is herewith submitted for the purpose of opening an account and I do hereby certify this information to be true:

Completed By:

Name: _____ Date: _____
Phone: _____ Ext: _____ Email: _____

Please return completed form to: sylvia.gonzalez-arroyo@vrl.net

Account information submitted on this form will remain confidential and be used for the sole purpose of communicating with you.

Thank You! We appreciate your business!