



Accredited Analytical Resources, LLC

20 Pershing Ave. Carteret, NJ 07008
Tel. No. 732-969-6112 Fax No. 732-541-1383 Clients Service
Confidential Credit Application

General Information:

Company _____ Date: _____

Billing Address: _____

City _____ State _____ Zip Code: _____

Telephone No. _____ Fax No. _____ ~ _____

Type of Business: _____ Year Established: _____

Number of Employees: _____ Annual Business Volume: \$ _____

Primary Contact : _____ Tel. No. _____

Banks / Financial Institutions:

Name of Bank : _____ Name of Bank : _____

Account No. _____ Account No. _____

Tel. No. _____ Fax No. _____ Tel. No. _____ Fax No. _____

Trade / Credit References:

Company: _____ Company: _____

Account No. _____ Account No. _____

Address: _____ Address : _____

Tel. No. _____ Fax: _____ Tel. No. _____ Fax: _____

Applicant authorizes Accredited Analytical Resources, LLC to contact its trade and bank references for credit information in connection with this application. In addition, the applicant agrees to the following:

1. That the above facts are true, correct and I (we) will notify AAR immediately of any changes.
2. That the company (applicant) agrees to pay the entire balance upon receipt of sample data and if not received within 30 days of invoice date, I (we) will pay a FINANCE CHARGE of 1.5 % or (18 % per Annum) on the past due balance of my (our) account on the first of each month.
3. In the event of default, the company becomes legally liable for any reasonable Attorneys and or Collection fees and all other related costs necessary to remit the entire balance to Accredited Analytical Resources, LLC.

It is understood however, that any hazardous material and resulting waste submitted by the Company will be returned at the Company's expense.

The representatives made herein are correct to the best of my (our) knowledge, I (we) understand this application may be rejected or revoked by Accredited Analytical Resources, LLC at anytime if the actual facts are found to differ materially from those stated above.

Signature Type of Print Name Title Date