



Credit Application

**AMERICAN
WEST
ANALYTICAL
LABORATORIES**

463 West 3600 South
Salt Lake City, Utah
84115

(801) 263-8686
Toll Free (888) 263-8686
Fax (801) 263-8687
e-mail: awal@xmission.com

Kyle F. Gross
Laboratory Director

Peggy McNicol
QA Officer

Company Name: _____

Address: _____

City: _____ State: _____ ZIP code: _____

Phone # _____ Fax # _____

Accounts Payable Contact Person: _____

e-mail Address: _____ Bank: _____

Type of Business: _____ Incorporated? _____

Established (Date): _____ Federal ID #: _____

Please list the names of the owner(s) and/or officers.

Name _____ Title _____

Address _____

Name _____ Title _____

Address _____

Name _____ Title _____

Address _____

Credit References (Suppliers Only)

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Terms of Payment

Unless otherwise documented, payment must be received within **30 days** from the date invoiced. A service charge of 1.75% per month (21% annually) will be assessed on the unpaid balance after 30 days. In the event the amount due and owing is placed with a collection agency, the applicant and guarantors herein agree to pay court costs and reasonable collection fees.

Dated this _____ day of _____ 20_____

Authorized Signature: _____ Title: _____

High credit limits may require personal guarantees.