



EALABS.CA
EPOCH ANALYTICAL INC.
LEADERS IN ASBESTOS ANALYSIS

Unit 100 – 42 Fawcett Road
Coquitlam, BC V3K 6X9
Email: info@ealabs.ca
Ph: (604) 521-6806
Fax: (604) 521-6873
GST#: 816263073

Credit Card Approval Form

Date: _____

Company Name: _____
(if applicable)

Billing Address: _____
City: _____ Province: _____
Postal Code: _____

Main Contact: _____

Accounts Receivable: _____
(if applicable)

Phone: _____

Fax: _____

Email Address: _____

Terms: All invoices are payable within 30 days of receipt. Cheques are payable to Epoch Analytical Inc.

Accounting Contact: accounting@ealabs.ca or (604) 521-6806 ext. 112

Credit Card Info:

Name on Card: _____

Card #: _____ Expiry Date: _____

Signature: _____

Yes ! Please keep my credit card securely on file for future transactions.

Yes! Please send me a scanned copy of my credit card transaction receipt.

Office Use Only:

Comments: _____

EA Lab Code: _____

Approved by: _____ Date: _____