



Fallah Microanalytical Laboratory, LLC dba IDEHL

18372 Redmond-Fall City Road • Redmond, WA • Tel. 425-216-4536 • Fax. 425-556-5556

NEW CLIENT FORM

GENERAL INFORMATION

Client Name: _____

Company: _____ Email: _____

Phone No. : _____ Cell No. : _____ Fax No. : _____

Street Address: _____ City: _____

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Select Reporting options:

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TERMS AND CONDITIONS:

Copies of our current Terms and Conditions are enclosed and made a part hereof by reference.

Accepted by: _____ Date: _____