

**UC DAVIS ANALYTICAL LABORATORY  
APPLICATION FOR NON-UC CLIENT ID**

Lab's E-mail Address: [anlab@ucdavis.edu](mailto:anlab@ucdavis.edu)

Lab's Fax Number: 530-752-9892

**CLIENT Information**

**Name of Business Entity:** \_\_\_\_\_

**Requestor Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Office Phone:** ( ) \_\_\_\_\_

\_\_\_\_\_ **Cell Phone:** ( ) \_\_\_\_\_

\_\_\_\_\_ **Email:** \_\_\_\_\_

**FEIN(Federal Taxpayer ID Number):** \_\_\_\_\_ (Mandatory)  Tax Exempt

**Affiliation:**  United States  Foreign (Outside United States)

**Category:**  Private Business  Non-Profit  Education  Individual  Partnership  
 Government: [  Federal  State  City  County ]

**Will you be submitting imported soil samples?**  No  Yes **If yes, please contact the office to discuss the specifics of submitting foreign soil samples.**

**ACCOUNTING Information** (It is recommended that your bookkeeper complete this section.)

Please note: An invoice will be issued after analytical results are provided. **Payment is due upon receipt of invoice.**

**Purchasing Agent/Bookkeeper:**

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_

A purchase order  will or  will not be issued for work submitted by the above-referenced client.

Method of Payment will be made by:  Check  Wire Transfer (International Payments)

(Note: Credit card payments are not accepted at this time.)

**Analytical Lab Office use only**

Date Application Received: \_\_\_\_\_

Project Code EXT:  EDU  GOV  IND  Other: \_\_\_\_\_ Client ID # Assigned: \_\_\_\_\_

Processed By (initials): \_\_\_\_\_ on (date): \_\_\_\_\_

University of California W-9 / Credit References / Remit To Instructions sent to client: \_\_\_\_\_

DaFIS Customer ID Created: \_\_\_\_\_

[Ver 08 effective 8/7/13]