

# Meritech Inc.

## *Client Information Sheet*

**Company Name:** \_\_\_\_\_  
**Contact Person:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

### Addresses

#### Reporting

#### Shipping (Bottles/Coolers)

#### Billing

_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Attn:</b> _____	<b>Attn:</b> _____	<b>Attn:</b> _____
<b>Email:</b> _____		<b>Email:</b> _____
		<b>PO #:</b> _____

**If your organization is required to test wastewater for compliance purposes, please submit a copy of your current permit, noting the expiration date.**

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