

New Customer Request for Quote / Service Calibration & Repair

Basic Information	
*Company Name:	
DUNS #:	Federal Tax ID #:
Website:	*Tax Status : Taxable or Exempt (include cert)
*Main Phone :	*Main Fax:
Billing Information	
*Billing / Mailing Address:	
*City, State, & Zip:	
*Preferred Invoice Delivery Method: (select)	
Accounts Payable Contact:	Accounts Payable Phone:
Accounts Payable Email:	Accounts Payable Fax:
NOTE: Online Credit Application & Approval Required for Payment Terms. If applied & approved Mitutoyo Standard terms for service are Net 30. Mitutoyo Does Not offer discount for services.	
Shipping Locations (Service Locations) If different from above billing address	
Ship to Address 1:	City, State & Zip:
Ship to Address 2:	City, State & Zip:
Ship to Address 3:	City, State & Zip:
Contact Information	
*Your Name:	*Your Title:
*Your Email:	*Your Phone:
*Your Fax:	Cell:
*REQUIRED: <u>Please check this box to confirm the above information has been accurately provided to the best of your knowledge</u>	

Please return this form to: <u>repair-approvals@mitutoyo.com</u> for repair work or <u>cal-approvals@mitutoyo.com</u> for calibration work.