



## LNG Dental

Please complete the below information form in order for us to open an account on our Bookkeeping System.

We have a strict 30 days after Statement payment rule, and would like to urge you to keep to our Terms.

We Value Your Bussiness, and trust that you will have a long and standing relationship with LNG Dental.

We normally send your Order with overnight Courier, and a minimal fee will be charged accordingly.

Annotate	Dentist	Orhodontist	Lab	University	Hospital	Other
Customer / Practise Name						
Practise Number						
VAT Number						
Physical / Delivery Address						
Postal Address						
Telephone Number						
Fax Number						
Email Address / Contact						
Orders						
Email Address / Contact						
Accounts						
Doctor's Full Name						
Id Number						
Signature						Date