

SIGNING UP WITH NEWTON

Choosing Newton Microbial Laboratory as your preferred laboratory is fast and simple!

HOW TO BECOME A CLIENT

- Choose sample price: either \$17 per sample with \$17 shipping, or \$22 per sample with Free shipping options
- Fill out the form with your preferred sample price
- Fill out Electronic Funds Transfer/Credit Card Authorization Form
- Send completed and signed forms to info@newtonlaboratory.com



NOW WHAT TO EXPECT

- We will send you a welcome letter with:
 - Confirmation that we received your set-up forms
 - Personalized Chain of Custody made for your company
 - Link to access our online report portal
 - Printable pre-paid FedEx labels (if needed)
- We will also send you a package of pre-paid FedEx labels via USPS
- Now you are ready to send us your samples!

SENDING SAMPLES

- Collect samples
- Fill out Chain of Custody (COC) form (printed or on-line)
- Put samples in a FedEx envelope, or any shipping method you have selected
- If using your own shipping, please send the package to us at: 810 Dutch Square Blvd, Suite 204, Columbia, SC, 29210
- Once we receive your samples, we will send you NML Receiving Receipt via email
- Please make sure all the information on the NML Receiving Receipt is correct
- Your sample will be analyzed within 24 hours of receipt
- If you choose EXPEDITED services on the Chain of Custody (COC), we will analyze your samples before all other non-expedited samples
- We will send you your report along with a copy of your Chain of Custody (COC) in your email
- All reports are saved in our Online Portal, where you can easily access them on-line
- Questions and Concerns: Call 877-628-6944
- Email: info@newtonlaboratory.com



AGREEMENT FOR NEWTON MICROBIAL LABORATORY

This is an agreement between Newton Microbial Laboratory and _____, herein referred to as "Company".

TERMS AND CONDITIONS

The "Company" has the right to terminate this agreement, with or without cause, at any time.

The "Company" will be invoiced every Friday and the "Company's" credit or debit card will be automatically drafted for the amount of the invoice the following Monday. Newton Microbial Laboratory will use the Electronic Fund Transfer (EFT) form for payment that was completed by "Company."

If there are any discrepancies, "Company" will inform Newton Microbial Laboratory in order for the invoice to be reconciled so a payment can be made.

The "Company" agrees to pay Newton Microbial Laboratory a sum of \$17.00 per *Spore Trap* or *Direct ID* Sample Analysis.

The "Company" agrees to pay Newton Microbial Laboratory a sum of \$17.00 per *FedEx* standard overnight delivery using an envelope; a sum of \$27.00 per *FedEx* standard overnight delivery using a Pak; and a sum of \$37.00 per *FedEx* standard overnight delivery using a Box.

The "Company" agrees to pay Newton Microbial Laboratory an additional sum of \$5.00 per sample for which 'Plus Service' is selected.

The "Company" agrees to pay Newton Microbial Laboratory an additional sum of \$5.00 per sample for which 'Expedited Service' is selected.

This Agreement shall be effective as of _____ (the "Effective Date")

I, _____, acknowledge that I fully understand the fee schedule and terms of this agreement with Newton Microbial Laboratory.

Address:	
E-mail:	E-mail for Invoice:
Phone:	Date:
Owner/Company Representative Signature:	



AGREEMENT FOR NEWTON MICROBIAL LABORATORY

This is an agreement between Newton Microbial Laboratory and _____, herein referred to as "Company".

TERMS AND CONDITIONS

The "Company" has the right to terminate this agreement, with or without cause, at any time.

The "Company" will be invoiced every Friday and the "Company's" credit or debit card will be automatically drafted for the amount of the invoice the following Monday. Newton Microbial Laboratory will use the Electronic Fund Transfer (EFT) form for payment that was completed by "Company."

If there are any discrepancies, "Company" will inform Newton Microbial Laboratory in order for the invoice to be reconciled so a payment can be made.

When the " Company" sends 3 or more samples in an individual package,

- The "Company" agrees to pay Newton Microbial Laboratory a sum of \$22.00 per Spore Trap or Direct ID Sample Analysis.
- The "Company" agrees to pay Newton Microbial Laboratory a sum of \$0.00 per FedEx standard overnight delivery using an envelope; a sum of \$10.00 per FedEx standard overnight delivery using a Pak; and a sum of \$20.00 per FedEx standard overnight delivery using a Box.

When the " Company" sends less than 3 samples in an individual package,

- The "Company" agrees to pay Newton Microbial Laboratory a sum of \$17.00 per Spore Trap or Direct ID Sample Analysis.
- The "Company" agrees to pay Newton Microbial Laboratory a sum of \$17.00 per FedEx standard overnight delivery using an envelope; a sum of \$27.00 per FedEx standard overnight delivery using a Pak; and a sum of \$37.00 per FedEx standard overnight delivery using a Box.

The "Company" agrees to pay Newton Microbial Laboratory an additional sum of \$5.00 per sample for which 'Plus Service' is selected.

The "Company" agrees to pay Newton Microbial Laboratory an additional sum of \$5.00 per sample for which 'Expedited Service' is selected.

This Agreement shall be effective as of _____ (the "Effective Date")

I, _____, acknowledge that I fully understand the fee schedule and terms of this agreement with Newton Microbial Laboratory.

Address:	
E-mail:	E-mail for Invoice:
Phone:	Date:
Owner/Company Representative Signature:	



ELECTRONIC FUND TRANSFER AUTORIZATION FORM

Newton Microbial Laboratory

COMPANY INFORMATION

Company Name:

Address:

Email:

AUTOMATIC CREDIT CARD BILLING AUTHORIZATION

In order to ensure prompt payment for laboratory testing, please fill out the Information Section below and sign the form. All requested information is required. **Newton Microbial Laboratory** will automatically bill your credit card for the amount indicated and your total charges. You will receive a weekly invoice and the total amount billed will appear on your monthly credit card statement. You may cancel this automatic billing authorization by contacting **Newton Microbial Laboratory** in writing.

CARD HOLDER INFORMATION

Card Holder Name:

Card Billing Address:

Phone:

Email:

DEBIT CARD OR CREDIT CARD INFORMATION

Newton Microbial Laboratory accepts the following credit cards: Visa, MasterCard, American Express and Discover.

Credit Card Type:

Credit Card Number:

Expiration Date:

CVV No.:

AUTHORIZATION INFORMATION

I authorize **Newton Microbial laboratory** to automatically bill the debit card or credit card on file for the total account balance on the following Monday of each week.

Start Billing on:

Authorized Signature:

Date: