

New Customer Account Form

SHANGHAI PI CHEMICALS CO.,LTD

* Account No.:

Date: _____

Company/Institute: _____

Phone: _____

Fax: _____

Website: _____

Email: _____

Address: _____

Contact Person

Name: _____

Email: _____

Position: _____

(Laboratory Director, Principal Investigator, Management, Process Development/Scale-up, Purchasing Agent, Purchasing Manager, QA/QC, Research, Sales and Marketing etc.)

Telephone: _____

Fax: _____

Billing Address:

Company

Attention Line

Address

City, State, Zip

Phone No.

Fax No.

Shipping Address:

Company

Attention Line

Address

City, State, Zip

Phone No.

Fax No.

Please fill in this form, and fax to 86-21-58953701. Call 86-21-58953700 for questions.

* Leave the account number blank, we'll fill it.

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Email: sales@pipharm.com

Website: www.pipharm.com