

Neuberg Diagnostics Private Limited

D.No.1-118/24, Plot No.24, Survey No.64, Second Floor, Opp. Cyber Towers,
 Madhapur, Hyderabad - 500033. Phone +91 040 23122211



REFERENCE LABORATORIES

DATE :

CLIENT DATA FORM

(fill details in Capital Letters)

Select One	LAB / HOSPITAL / CLINIC / CORPORATE / ARC / OTHERS				PHOTO
Name of Client:					
Address of the Client:					
City:		Pin code:			
State:		STD code:			
Land Line:		Mobile:			
Fax:		PAN of the Client:			
Email ID:					
Type of Customer Profile:					
Name & Designation of Authorised Person:					
Form of Organization	Proprietary	Partnership	Private Ltd	Public	
Contact Person - Lab:		Contact Person - Accounts:			
Expected Date of Sample Collection:		Discount pattern (if any):			
Mode Of Payment - Credit/Cash		Special Rate (if any):			
Security Deposit (if any):		Expected Business p.m.			
Credit Days:					
Remarks:					
Report despatch mode:	a) Mail	b) Courier	c) Hand Delivery	d) Pick up by Client	
Name & Signature Of Client:					
Date:					
(Office Use Only)					
Client Code:	Credit Limit:	Created on Date:			
Signature of Sales Executive:		Name In Caps:			
Signature of ZSM / RSM:		Name In Caps:			
Signature of Finance Head:					
Signature of Business Head:					