

## Customer Application Form (B2B Customers Only)

**PLEASE COMPLETE AND SIGN THIS FORM AND ATTACH COPIES OF OFFICIAL SUPPORTING DOCUMENTS.**

### LEGAL IDENTITY

Business Name: \_\_\_\_\_

Legal Form: \_\_\_\_\_

Registration Number: \_\_\_\_\_

Main Business Activities: \_\_\_\_\_

### REGISTRATION DETAILS

Registration Number: \_\_\_\_\_

Place of Registration: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Date of Registration: \_\_\_\_\_

VAT/TAX Number: \_\_\_\_\_

### ADDRESS DETAILS

Address of Head Office: \_\_\_\_\_

Post Code: \_\_\_\_\_

P.O Box: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### NOTES

*By signing this document I confirm that provided information is accurate and true to my knowledge and belief.*

Signature of Authorized Representative: \_\_\_\_\_

Name of Authorized Representative: \_\_\_\_\_

Date: \_\_\_\_\_