

Supplier Information Sheet

General Information :

Company Name : _____

Address : _____

Post Code : _____ Town : _____

Email : _____ Phone Number : _____

Legal information :

Identification Number : _____

VAT Number : _____

Legal Form : _____ Country of registration : _____

Primary Contact :

First Name : _____ Last Name : _____

Position : _____

Email : _____ Phone Number : _____

Payment Terms :

Payment Method : Bank transfer

Payment Terms : 30 days end of month

IBAN (Attached official doc) : _____