



### Customer Registration Form

Name details	Store/ Cust. Number/ Check ID																																																						
	Company																																																						
	Title		Last name																																																				
	First Name/s																																																						
Designation																																																							
Address of business	Customer type		Acq. Dist.			Time zone		Blocking code		Representative no.																																													
	Door No.		Floor number			Appt / Bldg.																																																	
	Street/Road Name/Block																																																						
	Area																																																						
	Town / City																																																						
	Province							Post code			NBR M-mail																																												
	Near / Optional																																																						
	Landline Number 1							Landline Number 2																																															
	Fax Number							Mobile Number																																															
	e-mail address																																																						
Memo																																																							
Cardholders	Cardholder 1																																																						
	Cardholder 2																																																						
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No. of employees																																																							
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Regn. / Lic. Type 2		No.												Valid Till		D	D	M	M	Y	Y																																		