



CUSTOMER REQUIRED INFORMATION

COMPANY INFORMATION

Company Legal Name: _____
Company Trade Name: _____
Address: _____ Suite #: _____
City: _____ Province/State: _____ Zip Code: _____
Tel: _____ Fax: _____
VAT #: _____ Import/Export #: _____

COMPANY OWNER'S INFORMATION

Owner/Official Name: _____
Title: _____
Tel: _____ Fax: _____ Email: _____

CONSIGNEE'S INFORMATION

Consignee/Official Name: _____
Title: _____
Tel: _____ Fax: _____ Email: _____

SHIPPING INFORMATION

Shipped to: _____
Country: _____ City: _____ Port: _____

Name: _____ Signature: _____ Date: _____