



**C.O.D & 7-DAY EFT APPLICATION FORM 2019**

COMPANY NAME			
TRADING NAME			
VAT REG NO.		CO. REG NO.	
PHYSICAL ADDRESS (Delivery)		POSTAL ADDRESS	
POSTAL CODE		POSTAL CODE	
	NAME	CONTACT NUMBER	E-MAIL ADDRESS
OWNER			
ACCOUNTS CONTACT			
BUYER			
WEBSITE			