



**NEW CUSTOMER REQUEST**

**TO BE COMPLETED BY CUSTOMER**  
**INVOICING ADDRESS**

Company Name:			
Address:			
Town/City:			
County:		E-mail:	
Post Code:		Phone:	
Country:			
Company Registration Number :			
VAT number:			

**SHIPPING ADDRESS (if different from invoicing address)**

Company Name:			
Address:			
Town/City:			
County:		E-mail:	
Post Code:		Phone:	
Country:			

**LEGAL ADDRESS (if different from invoicing address)**

Company Name:			
Address:			
Town/City:			
County:		E-mail:	
Post Code:		Phone:	
Country:			

**FINANCIAL DETAILS**

IBAN Code:			
Bank Name:		Branch Name:	
VAT (%):			
Payment terms:	Proforma		<i>Terms subject to approval</i> <i>First two orders received to be on proforma basis</i>
Payment method:			
			Estimated monthly spend
Invoices by e-mail:	Yes	No	Shipping Charges: TBA on customer basis Orders over £200.00 - shipping FOC Orders under £199.99 - shipping charge as below Standard freight - £10 per order Premium freight - £15 per order
Delivery note valued:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**CONTACT DETAILS**

<b>Sales Orders Acknowledgment Contact Person:</b>			
Job Title:		Email:	
Phone:		Mobile Phone:	
<b>Invoicing Contact Person:</b>			
Job Title:		Email:	
Phone:		Mobile Phone:	
<b>Other Purchasing Contact Person:</b>			
Job Title:		Email:	
Phone:		Mobile Phone:	
<b>Other Contact Person:</b>			
Job Title:		Email:	
Phone:		Mobile Phone:	
Website:			
Signature :			
Print name:			
Date:			

**CONTACT DETAILS**

<b>Supplier Reference 1</b>			
Company Name:			
Address:			
Town/City:			
County:		E-mail:	
Post Code:		Phone:	
Country:		Contact Name	
<b>Supplier Reference 2</b>			
Company Name:			
Address:			
Town/City:			
County:		E-mail:	
Post Code:		Phone:	
Country:		Contact Name	

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