

Customer & Supplier Form



General information

Full Company name	<input type="text"/>
General visiting address	<input type="text"/>
Postal code	<input type="text"/>
City	<input type="text"/>
Country	<input type="text"/>

Contact details – Company

General Telephone number	<input type="text"/>
General Website address	<input type="text"/>
General E-mail address	<input type="text"/>

General information

Chamber of Commerce Registration nr.	<input type="text"/>
VAT number	<input type="text"/>

Contact details – Finance department

Name contact	<input type="text"/>
E-mail address	<input type="text"/>
Telephone number	<input type="text"/>

Prefer Invoice settings

Digital by E-mail Hardcopy by post

Invoice E-mail Address	<input type="text"/>
Invoice Postal Address	<input type="text"/>
Invoice Postal code	<input type="text"/>
Invoice City	<input type="text"/>
Invoice Country	<input type="text"/>

Bank Details

Name of Bank	<input type="text"/>
IBAN number	<input type="text"/>
BIC code	<input type="text"/>