

Dear Business Partner,
to record you in our ERP registry, we kindly ask you to send us this form completed in its parts, where applicable.

NB. The form is digitally fillable.

Data

Company name: _____

VAT number/ Tax ID number: _____

Registered office address

Street/Square: _____

Number: _____

Country: _____

City: _____

ZIP Code: _____

State: _____

Shipment address (only if different from the registered office):

Street/Square: _____

Number: _____

Country: _____

City: _____

ZIP Code: _____

State: _____

Days and opening hours: _____

Contacts

Contact person: _____

E-mail: _____

Phone: _____

Purchasing office

Contact person: _____

E-mail: _____

Phone: _____

Administrative office

Contact person: _____

E-mail: _____

Phone: _____

Bank account details: _____

We remain at your disposal for any information, thank you.

3Diemme Srl

