

Application - Business Card & Vouchers

Company Name

Company Registration Number

Invoice address

Phone Number

Postcode and Postaddress

E-mail

Country

Fax Number

Business Card

Name of Card Holder

Vouchers (20 in each Booklet)

Nr of Booklets	Reference (voluntary)

I declare that I have read the conditions and that I approve of them
Place and Date
Signature (Manager)
Clarification of Signature

I declare that I have read the conditions and that I approve of them
Place and Date
Signature (Contact Person)
Clarification of Signature

Kreditbedömning	Kundnummer
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Taxi Stockholm's notes

Send your application to: Taxi Stockholm, box 6576, S 113 83 Stockholm, Sweden. Faxnumber +46(0) 8 612 03 90