

REGISTRATION FORM

Electronic signing

PAYEE'S DETAILS

Company registration number:	
Assignment account:	
Name:	
Contact person payee:	
Mail contact person payee:	
Address (street- /postal address)	
Postcode / City	
Country:	
Telephone:	
Contact person bank:	
Mail contact person bank:	

PUT X FOR DESIRED PRODUCT

AvtaleGiro

eFaktura

We hereby declare that we will comply with the laws and guidelines applicable to the solution at any given time and that we have read and accept the contractual conditions for the use of the service(s).

Place/date _____

Customer's (payee's) signature _____

Place/date _____

Bank's signature _____

Bank's signature in capital letters _____