

Business na	ıme*				
Address*		City* .		Province*	
POSTAL CODE*		Country*			
Tax Code/Vat nr.		VAT nr. Italy			
Telephone*		Fax _			
E-mail*					
Orders E-mail		Invoice E-mail			
Payment typ	De				
Manager		Telephone			
E-mail		Fax			
ONLY ITALY	/ :				
E-mail pecSDI Code					
DIFFERENT	DESTINATION:				
Description					
		City		Province	
Telephone Mobile					
-		E-mail			
Bank accou	nt details				
NOTES FOR	R DELIVERY:				
Drive only		Unloading with crane			
CUSTOMER	R TYPE:				
Garden	Building warehouse	Ceramic showroom Ot	her		
Member of c	central purchasing depart	ment No. points of sale			
NOTES					