D E C O R A T O R R E G I S T R A T I O N F O R M 2 0 1 9

|  |  |  |  |
| --- | --- | --- | --- |
| Company name / Trading as |  | | |
| Registered Company name |  | | |
| VAT Reg. No |  | Company Reg. No |  |
| Directors / Partners / Buyers: | | ID No: | |
|  | |  | |
|  | |  | |
| Street Address | | Postal Address | |
|  | |  | |
|  | |  | |
| Tel No | | Email | |
| Cell No | | Fax No | |

REFERENCES:

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name |  | | |
| Contact Person |  | Tel No | |
| Company Name |  | | |
| Contact Person |  | | Tel No |

I, the undersigned, hereby declare that the above information is correct and that I have full legal capacity for the orders and payment thereof and hereby bind myself jointly and severally as principal debtor for the punctual payment of all sums due.

I acknowledge that I have read and understood the Terms and Conditions of all business transactions between myself and Inhabit Concept Store.

|  |  |  |
| --- | --- | --- |
| Signed: |  | |
| Name: |  | Date: |