Telephone: 082 902 1811
Email: info@enduraplus.co.za
Website: www.enduraplus.co.za

CUSTOMER INFORMATION FORM

1. Registered name of Business: _____
2. Trading name: _____
3. Registration number: _____
4. Delivery address: _____

   _____

   _____
5. Nature of business: _____
   (E.g. wholesaler, pharmacy, cosmetics, etc)
6. Contact Details:

   Telephone: (_____) _____

   Email: _____

   Cellular No.: _____
7. Names of Contact Persons authorised to act on behalf of the Business:

   Orders: _____

   Accounts: _____

Signed at _____ on this the _____ day of _____

_____ _____

Name of Authorised Signatory (Please Print) Signature

Kindly email to accounts@enduraplus.co.za
This form is NOT an application for Account/Credit Facility