

| To be completed by Beekenkamp | | | |
|-------------------------------|----------------|------------------------------|----------|
| Client number: | | Backoffice representative: | |
| Representative: | | Sales manager: | |
| Broker: | | Area manager: | |
| General | | | |
| Company name: | | | |
| Company name 2: | | | |
| Adress: | | | |
| Adress 2: | | | |
| Postcode: | | City: | |
| State/ Province: | | Country: | |
| Chamber of Commerce no.: | | VAT no.: | |
| Phone no. general: | | Fax no.: | |
| Mobile phone: | | Website: | |
| E-mail general: | | Language: | |
| Bank/ IBAN: | | SWIFT/ BIC: | |
| Contact details | | | |
| Name: | | Name: | |
| Phone no.: | | Phone no.: | |
| Mobile phone: | | Mobile phone: | |
| E-mail: | | E-mail: | |
| Receive: | Order confirm: | | Receive: |
| | Delivery note: | | |
| | Invoice: | | |
| Contact details | | | |
| Name: | | Name: | |
| Phone no.: | | Phone no.: | |
| Mobile phone: | | Mobile phone: | |
| E-mail: | | E-mail: | |
| Receive: | Order confirm: | | Receive: |
| | Delivery note: | | |
| | Invoice: | | |
| Operations | | | |
| Delivery conditions: | | Day of transport: | |
| Transporter: | | Airport of destination: | |
| E-mail order confirmation: | | E-mail delivery note: | |
| Phyto certificate: | | Delivery on CC/DC | |
| Deposit BKX-tray: | | | |
| Finance | | | |
| Expected turnover: | | Expected turnover <120 days: | |
| Credit limit: | | Currency: | |
| Payment condition: | | E-mail invoices: | |



| Alternate shipping address | | | |
|----------------------------|--|-------------------------|--|
| Company name: | | | |
| Company name 2: | | | |
| Contact person: | | | |
| Adress: | | | |
| Adress 2: | | | |
| Postcode: | | City: | |
| State/ Province: | | Country: | |
| Phone no. general: | | Fax no.: | |
| Transporter: | | Airport of destination: | |
| Custom broker: | | PD document: | |
| | | | |
| Remarks | | | |
| | | | |