

## CUSTOMER SHEET

---

Dear Customer,

With your first order as a new client you'll get an Id.-number from our company. Therefore we ask you to answer the following questions so that we can guarantee a trouble-free and reliable delivery:  
Please do not forget to enclose a copy of your trading license.

Company name \_\_\_\_\_

Legal form \_\_\_\_\_

Owner \_\_\_\_\_

Street No. /P.O. Box \_\_\_\_\_

Country, Zip Code and town \_\_\_\_\_

Telephone \_\_\_\_\_ private \_\_\_\_\_

Fax \_\_\_\_\_

VAT Number \_\_\_\_\_

Delivery address \_\_\_\_\_

( if it differs from the address above )

Person to contact \_\_\_\_\_

e-Mail address: \_\_\_\_\_

Type of Business:     Onlineshop     Clothingshop     Other \_\_\_\_\_

Password for onlineaccount: \_\_\_\_\_

What range of products are you interested in:

Baby     Kids     Men     Women     Sports     Home

How would you like to receive your offers:

e-Mail     Fax

To avoid queries we kindly ask you to answer all questions as exact and complete as possible.  
Please send this form back to us. **Please note, if you want to be distributor you have to reach a yearly turnover of 1.000€**

Thank you very much and we are looking forward to a good cooperation.

Yours sincerely  
Living Crafts GmbH & Co.KG

Signature of the customer:

\_\_\_\_\_ (place)

\_\_\_\_\_ (date)

\_\_\_\_\_ (signature)