



CUSTOMER REGISTRATION FORM

Fax: 01476 514640

Company address/
Company stamp

.....
Company name

.....
Registration no.

.....
Street House no.

.....
Post code City

.....
County

Contact:

.....
Title

.....
First Name Last Name

.....
Telephone Fax

.....
Email Website

Activity:

(Tick boxes as applicable)

Specialist dealer

Repair engineer

Manufacturer

Other

Shipping address:

(only complete if different from the billing address)

.....
Company

.....
Street House no.

.....
Post Code City

.....
County

Please complete the registration form and fax it to 01476 514640 or Email to: info@gev-online.co.uk.
Within a few days we will send you a set of catalogues and your personal login for the GEV Webshop.

Date:

Signature: