

Business Information

Company name:	
Contact person:	
VAT number:	
Invoice address:	
Zip code / City:	
Delivery address:	
Zip code / City:	
Telephone / Telefax:	
Website:	
E-mail:	
Loading dock present:	

Business operation (fill out one of the options with 'X'):

Restaurant / Catering *Retail* *Wholesale* *Industrial*

Owner Information

Name:	
Person number:	
Address:	
Zip code / City:	
Telephone number:	
Mobile number:	
E-mail:	

Language: (In order to offer You the best service possible, please fill out which language(s) as appropriate)

Swedish *Danish* *English* *Cantonese* *Mandarin* *Vietnamese*

We Thank You for choosing CT Food as Your Supplier!

We will do our utmost to meet your needs, expectations and requests with excellence service!

Terms of payment: 15 days net at approved customary credit check by intrum justitia, otherwise we require either bank guarantee / personal guarantee, or cash/prepayment.

Terms of delivery: Ex Works

Time of delivery: 1-3 days after order confirmation

If You have any queries, please do not hesitate to contact us!

We look forward to a long and prosperous cooperation!

Please fill out this form and return it by fax or e-mail. To complete your application, please attach a copy of your business license. Our assortment list will be sent to you shortly.