

PLEASE FAX TO MBF Filmtechnik GmbH / 0049 (0) 69-340004-30

INFORMATION SHEET FOR OUR NEW CUSTOMERS

Private

Company

Surname.....

Company name.....

First name.....

Owner of the company.....

Street name.....

Street name.....

Zip Code,City:.....

Zip Code,City.....

Country:.....

Country.....

Phone/fax:.....

Phone/fax:.....

for EU-Members only:.....

Value added tax identification number / VAT Reg.No.:.....

Subject:

Please specify MBF quotation number.....if at hand

Please send us a copy of your ID card or your passport

Surname.....

First name.....

Number of identity card/passport..... Valid to:.....

Please give here references of rental companies, film production companies etc. you cooperate with

.....

VISA / EURO-MASTER (please delete at applicable)

Credit Card No..... Valid to:.....

Account information

Name of the bank/located at:.....

Account No..... Bank No:.....

Customer and invoice recipient are identical: **Yes..... No.....**

If no, the signatory agrees in case of controversy he will pay all costs of this order.

Billing address

Surname.....

First name.....

Street name.....

Zip Code,city.....

Phone/fax.....

Country.....

I confirm that I have not filed an affidavit within the last three years **Yes** **No.....**

With my signature I confirm the information above.

Date.....

Signature.....