

Request premium account

You should **sign** this document and **send it** by fax or email as confirmation to the data below, accepting the conditions of contract

A. Company Information

Company name:	VAT Number:
Street address 1:	Zip/Postal Code:
Country:	City:
First name:	Last name:
Phone:	Fax:
E-mail address:	

B. Subscription Information (Choose an option)

<input type="checkbox"/>	PREMIUM PLAN Platform + Promotion Quarterly fee: 349€/quarter + IVA Duration (months): 3	<input type="checkbox"/>	BASIC PLAN Platform Annual fee: 199€/year + IVA Duration (months): 12
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C. Payment Method

a. Direct debit

Bank name:	Bic Code:
IBAN Number:	Bank Address:
Bank Account Number:	

b. Transferencia bancaria

Beneficiary: SOLUCIONES GLOBALES Y GESTIÓN DE COMPRAS S.L.	Bank: SABADELL ATLÁNTICO
Account: ES67-0081-5387-5100-0110-6813	

Company Stamp:

Sign in here: