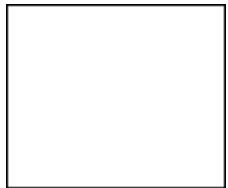


EURO GLOBAL FOODS & DISTILLERIES LTD

*Office : 9-14 OGSHC OTA IDIROKO ROAD
P.M.B. 1042 OTA, OGUN STATE*



NO: -----

APPLICATION FOR CUSTOMER REGISTRATION.

Name of Applicant: _____

Business Name (if any): _____

Office/Shop Address: _____

E-mail Address: _____

Telephone/ Mobile Number: _____

Residential Address: _____

Next of Kin: _____

Guarantor: _____

Contact Address: _____

Warehouse/Stores (Yes/No): _____

Banker's Name & account name: _____

Do you have any distributor Van? (Yes/No): if Yes, what is the capacity: _____

I / we undertake to abide with all the rules and terms of the Company under which the facility would be approved.

Applicant's Name

Sign/Date:

REP Name

Sign /Date:

RSM Name

Sign /Date:

Sales Director's Approval :

Financial Controller's Approval :

Managing Director's Approval :

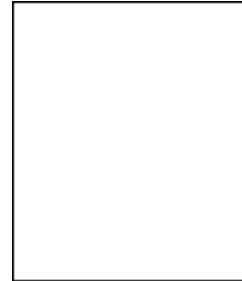
Signature / Date.

1 cust code: _____
2 Region: _____
3 Location: _____
4 Sales Rep: _____

5 ASM: _____
6 RSM _____
7 SD/GM: _____

EURO GLOBAL FOODS & DISTILLERIES LTD

CUSTOMER'S IDENTITY CARD



1. BUSINESS NAME: _____
2. OWNER'S NAME: _____
3. FULL ADDRESS OF THE PLACE OF BUSINESS:

4. CONTACT PHONE NO.: _____
5. BANK NAME: _____
6. BANK ACCOUNT NUMBER: _____
7. TYPE OF BANK ACCOUNT: _____

SIGNATURE

UNDERTAKING

I, (Mr./Mrs./Chief)
of located at the following
address,

undertake not to give goods on credit to any Sales Executive of **Industrial Goods Distribution & Supply Co. Ltd** and shall be solely held responsible if I decide to do otherwise.

Signed:

Name:

Address:

Signature:

Phone No:

NB: Please make a photocopy of the duly completed undertaking and send the original to the **Managing Director** (Industrial Goods Distribution & Supplies Company Limited, Plot 9-14, OSHC Industrial Estates, Estate Bus Stop, Idiroko Road, Ota, Ogun State. Nigeria.