



# CUSTOMER MASTER DATA SHEET (EU)

Cash & Carry

## 1. CUSTOMER DATA

Company name: \_\_\_\_\_

Street address: \_\_\_\_\_

Post code: \_\_\_\_\_ Place: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

VAT ID number: \_\_\_\_\_

Name: \_\_\_\_\_

Position (owner or MD): \_\_\_\_\_

## 2. Authorisation for further parties entitled to effect purchases

I hereby authorise the persons listed below to effect purchases from METRO Cash & Carry Österreich GmbH on behalf of the company specified above.

**PLEASE NOTE: Special authorisations are no longer valid: Only the registered persons entitled to effect purchases are permitted to effect tax-free collection on behalf of the company!**

1) First name: \_\_\_\_\_ Position: \_\_\_\_\_

Surname: \_\_\_\_\_ ID number: \_\_\_\_\_

2) First name: \_\_\_\_\_ Position: \_\_\_\_\_

Surname: \_\_\_\_\_ ID number: \_\_\_\_\_

3) First name: \_\_\_\_\_ Position: \_\_\_\_\_

Surname: \_\_\_\_\_ ID number: \_\_\_\_\_

4) First name: \_\_\_\_\_ Position: \_\_\_\_\_

Surname: \_\_\_\_\_ ID number: \_\_\_\_\_

5) First name: \_\_\_\_\_ Position: \_\_\_\_\_

Surname: \_\_\_\_\_ ID number: \_\_\_\_\_

I confirm that the authorised persons can only effect purchases on behalf of the company.

**Please note that the authorised persons must be able to identify themselves and produce a foreign certification document.**

**Any changes in the data disclosed here are to be notified to us immediately!**

Upon appending my signature, I confirm that I have read the Conditions of Sale of Metro Cash & Carry Österreich GmbH, and declare myself to be in agreement with the content thereof. Data protection: I consent to the processing of my aforesaid data and of incidental data aggregated within the parameters of business transactions by Metro Cash & Carry Österreich GmbH, as described in the Conditions of Sale.

I do not wish to receive – please mark with a cross –

mail from Metro  faxes  telephone calls  e-mails  SMS/MMS.

I can revoke this consent at any time. I affirm that the information provided above is complete and accurate.

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Signature of the owner / Managing Director

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Place, date