

COMPANY'S IDENTIFICATION FORM

Company's Identification

-
- Company's Name: _____
 - _____
 - VAT number or equivalent Tax number: _____
 - Company's Legal Representative: _____
 - _____

Company's Address

-
- Full address: _____
 - Zip Code: _____
 - Country: _____
 - Telephone Number: _____
 - Fax Number: _____

User's name and e-mail

-
- | | |
|---------|--------|
| ▪ Name: | E-mail |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Contracted Collective System

-
- AMB 3E
 - ERP – Portugal

Did your company placed any EEE in the Portuguese market in 2005?

- YES
- NO

Date

Signature