

Tenant Request Form

This form will be used for financial correspondence, invoicing and potential payments.

Identification

Please attach official document specifying your registration number in a trade register.

Shop name	Bönor & Blad
Shopping Center	Marieberg Galleria
Contract N°	

Legal partner

Org N°/MVA N°	5564249745		
Email			
Name	Bönor & Blad AB		
Address	BOX 2332		
Postal Code	103 18	City Stockholm	Country Sverige

Billing information

Name			
Address			
Postal Code		City	Country
Phone N°			
Email for invoice	Inbox.lev.332265@arkivplats.se		
Email for communication	helena@bonorochblad.se		

Payment details

Please attach bank confirmation

Bank name	
Bank account N°/BankGiro/PlusGiro	BG: 172-7601
SWIFT/BIC	
IBAN	
Account holders name	
Land of the bank	Sverige

Comments

Date	
Signature	