# **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	Proshop
Shopping Center	Fields
Contract N°	

#### Legal partner

Org N°/MVA N° 876143712

**Email** 

Name Proshop AS Address

Lundevegen 29

Country Norway Postal Code 3800 City Bø i Telemark

#### **Billing information**

Name Proshop AS Address Lundevegen 29 Postal Code 3800 City Bø i Telemark Country Norway Phone N° Email for invoice invoice@proshop.com Email for

## Payment details

communication

#### Please attach bank confirmation

Bank name DANSKE BANK Bank account 81111094810 N°/BankGiro/PlusGiro SWIFT/BIC DABANO22XXX **IBAN** Proshop AS Account holders name Land of the bank Norway

## Comments

Data		
Date		
Date Signature		
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