

# 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	AFRY
Shopping Center	Allum
Contract N°	

### Legal partner

Org N°/MVA N°	915229719				
Email					
Name	AFRY Norway AS				
Address	Postboks 18				
Postal Code	0216	City	OSLO	Country	No

### Billing information

Name	AFRY Norway AS				
Address	Postboks 18				
Postal Code	0216	City	OSLO	Country	No
Phone N°					
Email for invoice					
Email for communication					

## Payment details

Please attach bank confirmation

Bank name	SKANDINAVISKA ENSKILDA BANKEN AB (PUBL) OSLOFILIALEN
Bank account N°/BankGiro/PlusGiro	9750 97500723134
SWIFT/BIC	ESSENOKXXXX
IBAN	NO6697500723134
Account holders name	AFRY Norway AS
Land of the bank	NORWAY

## Comments

Date	
Signature	

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