Application form for the service
FLORIBAR
(formerly Codering Levend Groen)

Floricode.com
WORLD STANDARDS IN FLORICULTURE

Applying company

Company name: _____

Contact: _____ Functie: _____

Address: _____

Postal code / City / Country: _____

Telephone number: _____ Mobile number: _____

E-mail address: _____

Digital invoice: Yes ☐ No ☐ E-mail address for the electronic invoice: _____

Floricode services

The applying company wishes to enter into an agreement with Floricode regarding the following services:

☐ **Access basic (= search codes)** to the system Floribar (formerly Codering Levend Groen)

☐ **Access + (= apply for codes)** to the system Floribar (formerly Codering Levend Groen)

GLN company code (if known): _____

Adm. / deb.number: _____ ☐ RoyalFloraHolland ☐ PLANTION

Name software supplier: _____

Nature of the company: ☐ Supplier ☐ Trader ☐ Software company ☐ Other: _____

*With this form you also allow us to check your information at the auctions. If none of both is applicable to you, a copy of your entry form of registration with the Chamber of Commerce needs to be included with this form.

Signing
Signee declares:
- to be a legal representative of the applying company;
- to authorize Floricode for the term of the agreement to automatically debit the due amount for these services from the bank account number mentioned underneath;
- to have taken note of the General Terms and Conditions of Floricode, for these purposes consisting of General Stipulations and Specific Stipulations pertaining to 'Availability of code lists', as published on and downloadable from www.floricode.com and to accept that these apply to the (execution of the) agreement. At the request of the applicant, these General Terms will be sent to the applicant free of charge, by e-mail or other habitual method;
- Agrees that the (personal) data that are mentioned above are stored in the CRM system of Floricode to be able to deliver this service effectively.

Signed by: _____

Chamber of Commerce Number: |__|__|__|__|__|__|__|__|__|

VAT-number: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|

IBAN number: |__|__|__|__| |__|__|__|__| |__|__|__|__|__|__|__|__|__|__|

Bank Identification (BIC): |__|__|__|__| |__|__|__|__| |__|__|__|__|__|__|__|__|__|__|

Place/date: _____

Signature: _____

Send this form to Floricode by e-mail: info@floricode.com

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