



## CoP Customer Account Application Form

**Must be completed by all new customers or if any of the details have changed since your last application Please email your completed form to: [finance@vca-europe.com](mailto:finance@vca-europe.com)**

### Customer’s Details

Company Name:

Head Office Address:

Contact Person:

Head Office Telephone Number:

Head Office E-mail:

Address for invoicing:  
(The account will be set up under this name and address)

Finance Contact Name:

Finance Telephone number:

Finance E-mail address:

Company registration number:

VAT number:

Purchase Order Number required:

Yes  No

SDI Code (if required):

Billing Currency:

Branch Office:

**Additional Contacts** (If relevant, please advise below of any additional CoP contacts)

**Additional Contact 1**

Contact Name:

Telephone number:

E-mail address:

**Additional Contact 2**

Contact Name:

Telephone number:

E-mail address:

**Additional Contact 3**

Contact Name:

Telephone number:

E-mail address:

**Privacy Information**

Any personal information you may have provided in this form allows VCA Europe S.r.l. to process your application. Details of how this data will be handled, stored and used can be found in our ["Privacy Notice"](#) (please follow the link). If you would like us to send you a hard copy of the Notice, then please contact VCA Europe S.r.l., Via Monte Pasubio 5, 24044 Dalmine (BG), Italy.

Note: If you are completing this form in a web browser (not Adobe Acrobat), the 'Submit by Email' button may not be compatible with your browser. If you experience difficulties using this button, please save the completed form in your browser and manually attach the file as a PDF to a new email. The completed form should be sent to [finance@vca-europe.com](mailto:finance@vca-europe.com)