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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  | | --- | | Agence Comptable – Service Facturier ***Création des Tiers***  **Tél.** : 05 34 32 30 27 **Fax.**: 05 34 32 31 00  Email : creation-tiers@listes-diff.inp-toulouse.fr |   **INP1** |  | Cadre réservé à la comptabilité fournisseurs | | |  |  | |  |  | |  |
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INFORMATION FORM – Fiche Client

ANY INCOMPLETE INDEX FORM WILL BE RETURNED FOR FURTHER INFORMATION

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| **RESERVED FOR THE ADMINISTRATION / RESERVE A L’ADMINISTRATION**  **Ecole ou Service:** … ……….. ……………… …….. **Mme/Melle /Mr:**  **Dat**e**:**  **Téléphone: Fax :** …………. **Mail:**… |
| HEADQUARTERS IDENTITY **NAME of the Institution / Company**: ………………………………………………………………………………………………  **VAT Code (European Union)**: .............................................................................................................................................  **Address of the Institution / Company**: ……………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………  **Zip Code**: ……………………………………………………………………………………………………………………………….  **City**: …………………………………………………………………………………………………………………………………….  **Country**: ………………………………………………………………………….…………………………………………………….  **PO reference:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **If different from the above information for billing address:**  **Name:** ……………………………………………………………………………………………………………………………………  **Billing Address:** …………………………………………………………………………………………………...………………………………………  **Zip Code**: ……………………………………………………………………………………………………………………………….  **City**: …………………………………………………………………………………………………………………………………….  **Country:** ………………………………………………………………………………………………………………………………..  **PO reference:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Contact:** 🞎 Madam 🞎 Miss 🞎 Mister: ……………………………………………………………………………………… **e-mail address:**  **Tel:** |

**Date and SIGNATURE:**