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SILVERFAS UNIT 4  
FASCIA ROAD 96  
SILVERTONDALE  
PRETORIA

**CUSTOMER INFORMATION:**

This document allows BULKMART to list me/us as a customer.

Business Name: .....

VAT No.: ..... Type of Business: .....

Shop Number: ..... Shopping Centre/Complex: .....

Street Number & Name: .....

Suburb: ..... Town: .....

Postal Address: ..... Code: .....

Trading/Delivery Times: .....

Owners Name: ..... I.D No: .....

Residential Address: .....

Contact Person (Orders):.....Cell. No: .....

Telephone No: .....

E-mail address where we can forward promotions/price changes/general notifications to:

.....

Contact Person (Accounts/Payments):.....

Telephone No: .....

E-mail: .....

Customer Signature: .....Date: .....

Payment: STRICTLY C.O.D.

Email your form to [info@bulkmart.co.za](mailto:info@bulkmart.co.za)

Please ensure that above details are complete and correct. Your enquiry will be held confidential.