



Application for a GS1 Company Prefix License

I Company Information (In CAPITAL LETTERS)

COMPANY NAME:		
STREET ADDRESS:		
CITY:	POST CODE:	COUNTRY
TEL (including country and city codes):	FAX	EMAIL:
TRADING ZONES (Africa, Europe, Asia...):	Countries in which you have subsidiaries or a parent company:	
TAX N°:	COMPANY REGISTRATION N°:	WEBSITE:

BILLING ADDRESS (please tick where appropriate)

<input type="checkbox"/> Same as Company Address	<input type="checkbox"/> Different Address (please insert below full billing address):

II Contact Persons Information (In CAPITAL LETTERS)

CHIEF EXECUTIVE OFFICER/MANAGING DIRECTOR:

Mr/Ms	First Name	Last Name	E-mail
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COMPANY CONTACT NAME (individual responsible for allocating GS1 numbers within your company):

Mr/Ms	First Name	Last Name	E-mail
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ACCOUNTS CONTACT NAME:

Mr/Ms	First Name	Last Name	E-mail
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III Product Information

MAIN PRODUCT CATEGORY (e.g., food, hardware, cosmetics, clothing, etc.) _____

APPROXIMATELY HOW MANY PRODUCTS ARE IN YOUR PRODUCT RANGE?

10 100 1000 10000

Each different product, product variant (i.e. different colour, size, weight, flavour, etc.) and trade unit must receive a separate and unique number. Covering the next 3 year period, please provide us with an estimate (above) of the number of different articles to be identified.

IV Fee

The annual fee for the GS1 Company Prefix License, technical documentation and helpdesk support depends on the numbers required.

Please credit our bank account with this amount and send "proof of payment" with your completed Application

BANK: Credins Bank

Bank Account: GS1Albania

IBAN: AL 27212112050000000000374067

(Please state reason for payment as: "GS1 Company Prefix License Fee" and mention the name of your company).

I/We _____ agree to abide by the Terms and Conditions of the GS1 Company Prefix License.

Authorised Signature

Date
