

## Application for Registration as a TT-Line Agency

Please complete the form and send it together with your trade-licence by fax to:  
+49 (0)4502 801 226 or as an e-mail attachment to [agenturen@ttline.com](mailto:agenturen@ttline.com)

* Registered trade name:	_____
* Street and number:	_____
* Postcode, City:	_____
* Country:	_____
* Telephone:	_____
* Fax:	_____
* E-mail:	_____
* Web-site:	_____
* VAT-No.:	_____
* Contact:	_____

Do you want to settle invoices by direct debit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Bank:	_____	
Sort code:	_____	
Account number:	_____	
Owner of account:	_____	
The bank is not responsible for payment if our account does not cover the required amount.		
Date, Signature:	_____	

After registration we will send an e-mail to you with information