

Customer master data

(Please only fill in fields that have changed)

Please email to service@nexigroup.com

Business partner No.				Terminal-ID	
Change request					
☐ Address		☐ Contact details		☐ Others	
Company					
Legal form ☐ Sole trader ☐ Ltd ☐ plc ☐ Non-commercial partnership ☐ General partnership ☐ Limited ☐ Partnership ☐					
Company name				Industry, products and/or services	
Street address (no PO boxes), Town/City, Country, Postcode					
Alternative delivery address: Street address (no PO boxes), Town/City, Country, Postcode					
Proprietor if sole trader, or company name as entered in the commercial register			Names of all directors/board members on a separate sheet if necessary		
Commercial register No./Court of registration/Business No. (copy attached)		VAT ID		Cardholder name (max. 22 characters)	
Telephone No. with (country and) area code			Fax No. with (country and) area code		
Homepage			Email address		
Only for sole traders and partners of a non-commercial partnership (please enclose a separate list with the names and personal details of all partners):					
Home address: Street address (no PO boxes), town/city, country, postcode				Place of birth	Date of birth (DD/MM/YYYY)
Type of document ☐ ID card ☐ Passport	Document number	Issuing authority	Nationality	Valid until (DD/MM/YYYY)	
Beneficial owner (the person/persons in control of the company or to whom it belongs.) If more than one person is the beneficial owner of a company, please give the names of all owners on a separate sheet.					
It is hereby confirmed that the business relationship is not being opened on behalf of a third party (and especially not as a trustee) and, in the case of a general partnership or private partnership, that no single person holds or controls more than 25% of the share capital or voting rights of the company. If this is not the case, the name(s) of the beneficial owner(s) is/are to be given below.					
Title, first name, surname			Place of birth	Date of birth (DD/MM/YYYY)	
Home address: Street address (no PO boxes), town/city, country, postcode					
Notes					
Place, date					
Full name of signatory					
Company stamp and legally binding signature of contract partner or authorised signatory					

To change your bank information, please use the 'change of bank information' form.