



Company name: **BID2LOAD**

Street Address: 250 Pretorius Street
 Office 605
 Floor 6th
 Pretoria



Reg. no : 2007/208099/23
 Vat.no : 4650244702
 Tel : (+27) 127537396
 Email : support@bid2load.co.za
 Fax : 086 504 5802

BID2LOAD CUSTOMER APPLICATION FORM

CUSTOMER BUSINESS DETAILS:

<i>First Name:</i>				<i>Title:</i>	
<i>Surname:</i>					
<i>Company Name:</i>					
<i>Company Trading Name:</i>				<i>Registration No:</i>	
<i>ID Number/Passport no:</i>				<i>Vat Number:</i>	
<i>Physical Address:</i>					
<i>City/Town</i>					
<i>Country:</i>		<i>postcode</i>		<i>Province:</i>	
<i>Postal Address:</i>				<i>Postal code:</i>	
<i>Cell Phone Number:</i>					
<i>Email Address:</i>					

Package Summer

One year subscription
R2000.00
 <i>One year subscription 365 Days to access contact details of truckload tenders.</i> <i>Subscribe Now</i>
2 Year Subscription
R2500.00
 <i>Two Year subscription 730 days subscription to access contact details of truckload tenders.</i> <i>Subscribe Now</i>

BID2LOAD OFFICE BANK DETAILS	
Bank	FNB
Branch	255805
Account	62189426838
Account type	Cheque
Account	Europrepaid t/a BID2LOAD
Ref	

New banking details

CREDIT CARD

<i>Date:</i>	
<i>Card Number:</i>	
<i>Contact Number:</i>	

CREDIT CARD (MASTER CARD,VISA)

<i>Card holders name:</i>	
<i>Signatory Name</i>	
<i>Expiry date</i>	
<i>Card type</i>	

X _____
Customer`s Name / Surname

X _____
Date /Month/Year

X _____
Customer`s Signature__

X _____
Bid2Load Representative`s signature__

X _____
Bid2Load Representative Name / Surname

X _____
Date / Month/Year

Terms and Conditions

GO TO <http://bid2load.co.za/index.php/tos>