

טופס פרטי בנק לספק חו"ל

Dear Supplier

To enable us to set up your bank details on our ERP system (For EDI purposes) we must have your bank details presented on letter headed paper, signed by relevant member of staff at your organization. Pls. fill the following form and ensure this form is signed and stamped before returning it to us.

BANK DETAILS FORM

Supplier Trading Name						
VAT/ ID						
Beneficiary Address: (For	Individuals – Resid	ential or Work	place address)			J
Street & no.						
Zip code/postal code, place	e					
Country						
E-mail Address						
	I					
Beneficiary Name On th Account Note: If the Beneficiary compan letter that payment will be r	y name is not same	e as your Tradi	ng name then p	please provide officia	al confirmation	
Account Number				Currency		
Bank Details :						
Bank Name						
Branch Name						
Branch Address:						
Street & no.						
Post code/zip code/ location						
Swift / Bic Code						

IBAN Code									
(Required field for European accounts)									
(Required field only In case there's no SWIFT CODE)									
Aba / Routing No.									
Bsb No.		Τ	Τ	Τ					
(Required for Australia Only)									
Transit No. (Required for Canada only)									
Institution No.		'							
(Required for Canada only)									

Authorized details :

Name		Position
Signat	ure	Company
Date		E-mail:

* הערה: יש להגיש את הטופס בכתב מודפס, ולא בכתב יד.

* Note: The form must be submitted in printed, not handwritten.