



## Datasheet Bank Details and Tax-ID

Please fill in the form and send it back to ONTRAS via email at **capacity@ontras.com** (shipper) or **netzkunden@ontras.com** (network operator or end customer)

### Contact details

Company name

Address of the head office – no PO Box

Street

Number

City

Post code

Country

Name parent company  
(if there is one)

Address of the parent company

Street

Number

City

Post Code

Country

### Invoice details

Original invoice via mail  
(as PDF)

E-Mail for original  
invoice

Invoice Address (if different) – no PO Box

Street

Number

City

Post Code

Country

### Contact person for invoices

Name

Surname

E-Mail

Central E-Mail for  
requests (if necessary)

Telephone

Fax for copy of invoice

## Different beneficiary

Beneficiary  
(if different)

Address of the beneficiary – no PO Box

Street

Number

City

Post Code

Country

## Tax information

Taxable dealer

VAT ID

Commercial register no./  
local curt

## Bank details

Bank

Address of the Bank

Street

Number

City

Post Code

Country

IBAN

SWIFT/BIC

Account Number  
(for non SEPA  
payments)

Date:

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Name in block letters

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Signature

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Company Stamp