

MailboxCSBS

Tel: 029 2085 1681 E-mail: admin@mailboxcsbs.co.uk Web: www.mailboxcsbs.co.uk

Business Mailbox Application

Date:/...../.....

Company Name:

Business Style: Please tick 1 **Registered No.**

Limited	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Trading As	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Business Address:

Town: **County:**

Country: **Postcode / Zip code:**

Tel: **email:**

Business Owner / Director 1

Title..... First Name (s)..... Surname (s).....

Address

Town **County** **D/O/B:**/...../.....

Country **Postcode/Zip code**

Home Tel: **Occupation:**

Mobile: **email:**

Business Owner / Director 2

Title..... First Name (s)..... Surname (s).....

Address

Town **County** **D/O/B:**/...../.....

Country **Postcode/Zip code**

Home Tel: **Occupation:**

Mobile: **email:**

Proof of Identification

We must have one photo proof of ID – Passport / Driving license

PASSPORT	<input type="checkbox"/>	DRIVING LICENSE	<input type="checkbox"/>
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Mailbox Type

Please select the type of box you require:

STANDARD	<input type="checkbox"/>	PREMIUM	<input type="checkbox"/>	GOLD	<input type="checkbox"/>
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Mailbox Term

Please select the contract period required:

Please note the minimum rental period for the **Gold Mailbox** service is 6 months

Monthly	<input type="checkbox"/>	3 Months	<input type="checkbox"/>	6 Months	<input type="checkbox"/>	12 Months	<input type="checkbox"/>
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Registered Office & Directors Service Address

Free Registered Office with all 12-month mailbox rental on **Premium** and **Gold Mailbox** only

Free Registered Office	Yes	No
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Registered Office	Yearly £30.00	Directors Service Address £15.00
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Mail Forwarding

Please confirm if you require mail forwarding, if yes please indicate the frequency required:

Yes	No	Deposit £10.00 Paid
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Frequency

Daily	Weekly	Fortnightly	Monthly	On Request
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Authorisation to sign for deliveries

I / We hereby authorise CSBS to accept and sign for delivers where a signature is required

Sign **Print Name**

Position:

Terms & Conditions

Please sign below to confirm that you have read and agree to CSBS Terms & Conditions of Business

Sign **Print Name**

Position:

Please provide any additional information below:

Office Use

Authorised **Declined**

Signed **Print Name**