

# RETAILER FORM



## DEUS INFINITUM LIMITED

E-commerce, Business Consultancy, General Supplies & Merchant, Import & Export  
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Date: \_\_\_\_\_

**Name:**

Please use the registered company name not the trading name.  
If you are an individual, please use your own name

**Business Registration Number:**

Enter your Business Registration Number on your Certificate from

**Registered Address**

Please enter the full registered address of the Retailer or (if you are an individual) the address of the business

**TIN:**

Please enter the Tax Identification Number (TIN) of the retailer

**Contact Name:**

**Email Address:**

**Contact Phone Number:**

**Products to supply:**

**NB:** Attach all Company Certificates and any other relevant documents you think might be of interest.

### CONFIRMATION OF INFORMATION ACCURACY AND RELEASE OF AUTHORITY TO VERIFY

I hereby certify that the information in this application is correct.

Name:..... Witness:.....

Signature:

Title:

Date:

**ALLOW 10-15 BUSINESS DAYS FOR APPLICATION TO BE PROCESSED.**

Please complete all information requested. Incomplete applications will not be processed.