

Registration form Lolland Vand A/S' water kiosk

Company name:	
Address:	
ZIP code/town:	
Country:	
Phone number:	
E-mail:	
Contact person:	
wants to be registered at Lolland Vand A/S' Water kiosk.	
I, the undersigned, wants:	
a cash k	ey - deposit DKK 500,00
a credit	key - deposit DKK 2.000,00
Deposit is being charged immediately upon registration.	
Invoice e-mail	
Reference	
Date:	