



Flavour Sensations

Manufacturers of Flavours and Fragrances

To enable us to supply you with samples and goods we require the following details:

Name of business: _____

Registration No: _____ Vat No: _____

Trade name(s) of business (es): _____

Postal address: _____

Physical address: _____

Is this address private, residential or industrial? _____

Telephone No: _____ Fax No: _____

Cell No: _____ Email: _____

Date business established: _____

Is the business currently in production? _____ How many staff are employed? _____

Contact Person (Sales): _____

Tel No: _____ E-mail: _____

Contact Person (Technical): _____

Tel No/Ext: _____ E-mail: _____

Contact Person (Acc): _____

Tel No/Ext: _____ E-mail: _____

Names and addresses of directors/members/partners/proprietors:

1	Name	
	Residential Address	
2	Name	
	Residential Address	
3	Name	
	Residential Address	
4	Name	
	Residential Address	

Please return this form, with your query or order, to info@flavoursentions.co.za

We look forward to assisting you!

