

GPOS LTD
66 Mt. Eden Rd. Mt. Eden
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New Zealand
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GPOS Set Up Information Form

Company Information

Company Name: _____

Trading Name: _____

Shipping Address: _____

P O BOX: _____

Contact Name: _____ Phone No: _____

E-mail: _____

Website: _____

Bank No: _____

GST No: _____

Company IP Address: _____

Document Requirement:

1. Company Sales Conditions
2. Company Logo
3. Company Marketing Picture
4. Products In Excel File
5. Supply List in Excel File
6. Customer List in Excel File
7. Staff list In Excel File

I/We the agreement for the GPOS Account hereby declare that the information given in this form is true and correct

Also I/We authorize GPOS Ltd to Direct Debts From Our Accounts If We can not pay the Set up cost in 7 Days.

Print Name: _____ Signature: _____ Date: _____

Sacn: Upload :