

# HelsiTar Resale Form

---

**Company**

---

**Tax (Vat) Number**

---

**Contact person**

---

First Name

Last Name

**E-mail**

---

**Address**

---

Street Address

---

Street Address Line 2

---

City

State / Province

---

Postal / Zip Code

Country

**Web Site**

---

**Web Shop Site**

---

**Facebook site**

---

**Free message**

---