



Product Order Form (for E-Payment Customers)

Effective 13 September 2017

fields marked with * are mandatory

E-Payment Application Required

Distributor ID (do not fill in)

*Register Applicant as: User / Distributor - signed **Distributor Agreement** required

*Firstname, Surname / Company's name

*Street

*Zip code

*City

*Country

Shipping address (if different from Billing address)

*Phone #

Mobile #

*E-Mail

VAT-number (for companies)

***Please select:**

Price excl. VAT:

Payment Plan: 3/ 6/ 10/ 16/ 24

Leveluk K-8

EURO 3660

Price

LeveLuk SD501 Platinum

EURO 3000

VAT 19%*

LeveLuk SD501

EURO 2780

Shipping**

LeveLuk JR II

EURO 1680

(optional)

Ext. Warranty

LeveLuk R^{xt}

EURO 1600

Instalment Fee

Anespa DX

EURO 2200

Total

Downpayment

*E-Cleaner must be ordered separately!

* VAT Austria 20%

**Shipping: EU 34 €, Norway/Switzerland 47 €

K8: add 10 € to all shipping

***Payment method:**

Wire Transfer

Visa

MC

Amex

Credit Card No.

CVV

Valid till

Return Policy - as EU consumer regulation, product may return/cancel within 2 weeks from delivered date, also unused condition only

I certify that I have read, understand and agree to the Terms and Conditions set forth in the POLICIES AND PROCEDURES.

PRIVACY POLICY - By signing this Application Form, the Applicant agrees and confirms that ENAGIC will store and process his personal data and the information concerning the collaboration of both parties in electronic form or otherwise. He also agrees that following the rules of the ENAGIC Compensation Plan, his data will be made available both locally and internationally to other members of the ENAGIC Sales Organization and to the member companies of the international ENAGIC Group. Such data may be transferred to a State which is not a member of the European Union. This is for the purpose of handling cooperation as well as for the international execution of the ENAGIC sales system.

***Applicant's Signature**

Date (DD/MM/YY)

SPONSOR INFORMATION

*Name

*E-Mail

*Distributor ID

*Phone #

Register Applicant as my [] A line

***Sponsor's Signature**

Date (DD/MM/YY)

Commerzbank
Name: Enagic Europe GmbH
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IBAN: DE64300400000180321200
SWIFT: COBADEFFXXX

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Commercial Register :
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