INQUIRY FORM

Date:

P.O. No:

BILLING ADDRESS

Company Name:

Address:

State Province:

Zip/Postal Code:

City:

Country:

VAT No.:

Registration No.:

Contact Name:

Phone Number

Fax Number:

E-mail:

SHIPPING ADDRESS

Shipping address as billing address ☐

Company Name:

Address:

State Province:

Zip/Postal Code:

City:

Country:

Contact Name:

Phone Number

Fax Number:

E-mail:

Sample ☐ Retail ☐ Wholesale ☐ Others ☐

ITEM	PRODUCT CODE	DESCRIPTION	UNIT	QUANTITY

Note / Comment:

Thank you for your inquiry. This is an electronic form which can be filled in on your computer. After you complete it, please send it to us by email at info@agoraofflavours.com
We will get back to you with requested details by return.

AGORA OF FLAVOURS G.P.
Nik. Hatzidamianos & SIA O.E.
Address: 358 Marias Kiouri Str.
City: Piraeus
State: Neo Ikonio / Perama
Postal Code: GR188 63
Country: Greece
VAT No. : GR800596710
Registration Number: 131385207000
EORI No. GR800596710

BANK NAME: PIRAEUS BANK ACCOUNT
No. (EUR): 6631 128158 385
IBAN: GR13 0171 6310 0066 3112 8158 385
ACCOUNT No. (USD): 6631 128158 440
IBAN: GR80 0171 6310 0066 3112 8158 440
SWIFT (BIC) No.: PIRBGRAA

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