

MaskinLeverantörerna

Application for membership



Full membership Associated membership

Membership refers to the following section:

- Construction equipment Forestry Agriculture machinery (also fill in below)
 Forklifts/Material handling Road Maintenance Applies to agricultural machinery only:
 Manufacturer Importer Dealer

Company name: _____

Address: _____

Telephone: _____ VAT number: _____

Internet: _____

Billing address/
e-invoice: _____

Contacts:

Main contact:	Telephone:	E-mail:
Market:	Telephone:	E-mail:
Statistics:	Telephone:	E-mail:
After sales:	Telephone:	E-mail:
Turnover in Sweden (in thousands SEK): _____	Financial year: _____	Number of employees: _____

Qualification requirements:

The company meets the below qualification requirements for membership. Documents supporting this shall be presented upon request. Full qualification requirements can be found on www.maskinleverantorerna.se/stadgar

- Contract with manufacturer/importer regarding the sale on the Swedish market of brand new machinery/equipment in the relevant section's area.
 Registered company name and registered for VAT.
 Corporate/Liability insurance.
 The company has been engaged in, for membership qualified, business for at least two completed financial years.
 Balance sheet is approved and shows a solid financial situation.

By signature below, the undersigned hereby certifies that he/she has read through the association's qualification requirements and is in agreement with the requirements for membership:

Place and date: _____

Signature: _____

Name in block letters: _____

Title: _____

The application is sent to:
MaskinLeverantörerna
P.O Box 22307
104 22 Stockholm
or by e-mail to:
info@maskinleverantorerna.se