# ORDER FORM FOR A SECURE SIGNING CARD

Please fax to **(+32) (0) 3 247 76 79**

**User ID**: 5-☐☐☐☐☐☐☐☐-☐☐☐-☐☐

*Tip: If you do not know your subscription number or User ID, go to www.isabel.be/support6 and type the number **21232** in the search engine.*

**Company Name:**

.....

*In CAPITAL letters please. Do not forget to indicate hereunder the reason why you are ordering a new card, otherwise we will not be able to process your order.*

| DESCRIPTION | REASON FOR ORDERING | PRICE | TOTAL |
|---|---|---|---|
| Secure Signing Card | ☐ lost/stolen<br>☐ defect<br>☐ burnt (5 consecutive attempts to enter a wrong password) | ☐ 35.37 EUR* | = EUR* |

* Prices excl. VAT. This amount shall appear on your next Isabel invoice.

**DELIVERY DURING WORKING HOURS ONLY**

**Please deliver the password to:**

User Name: .....

Street: .....

N°.: ..... PO: .....

Postal code: .....

Town/City: .....

Country: .....

Telephone: ..... Fax: .....

DATE: ..... SIGNATURE: