

# ALUMINA D.O.O



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## CLIENT INFORMATION

<b>COMPANY NAME:</b>	
<b>ADDRESS:</b>	
CITY:	
ZIP CODE:	
COUNTRY:	
PHONE:	
EMAIL:	
URL:	
VAT-PIB NUMBER:	
BANK ACCOUNT NUMBER:	
NAME OF THE BANK:	
IBAN:	
SWIFT:	
CORE BUSINESS	
<b>MAIN FINANCE EMAIL (required):</b>	

## PROFESSIONAL REFERENCES

CONTACT NAME	POSITION - TITLE	EMAIL	PHONE
	MANAGEMENT		
	FINANCE		
	PURCHASE		
	SALES		
	MARKETING		
	TRANSPORT		

Does your company have a certified Quality Management System? (Yes/No)	
Does your company have additional Management Systems (ISO 14001, 45001, etc)? If yes, which one.	
Other certificates, licenses etc	
Do you accept Alumina Auditors for an audit? ?	

*Please fill out this partner datasheet to introduce your data in our system.*