

ORDER FORM

To order an X-Formation product, fill out and sign this form, then scan and email it to sales@x-formation.com. Please contact us for pricing information.

Company Data

Company Name: _____

Address: _____

ZIP/Postal Code: _____

Country: _____

Direct Phone: _____

Email: _____
(technical issues)

Currency: _____
(choose from EUR, USD, DKK)

City: _____

VAT (for EU): _____

Company Phone: _____

Email: _____
(financial issues)

Notes

.....

.....

.....

.....

.....

LM-X LICENSE MANAGER

To order an X-Formation product, fill out and sign this form, then scan and email it to sales@x-formation.com. Please contact us for pricing information.

License terms

Subscription License: or Perpetual License:

Supported platforms

Specify platforms:

For example: Win32, Win64, Linux_x86, Linux_x64, MacOSX

Signature

By signing below, you authorise X-Formation to process your order as indicated in this form.

Date

Printed Name

Signature

By signing this form I consent to X-Formation collecting and storing my data from this form for the purposes described in the following documents:

Privacy Statement - www.x-formation.com/company/privacy-statement/
Terms of Service - www.x-formation.com/company/terms-of-service/



LM-X LICENSE MANAGER

Employee verification form

I,, hereby confirm that the following is true:

1. Name of company: (hereinafter referred to as the company).

2. Year established:

3. Primary business:

4. Total number of people within the company for the past 3 years:

Departments:	Company size (number of people)		
	year.....	year.....	year.....
1. Sales & Marketing:
2. Research & Development:
3. General & Administration:
4. Other:
Total:

Signature

By signing below, I state that I am authorized by the company to complete this form, and I agree to provide documentation of the company's size upon X-Formation's request.

Date

Title

Authorized Signature