CONTACT DETAILS

Send this form to avtalsteckningregion2@byggnads.se together with attached translated documents. The subject of the mail should contain company name, registration number and D-U-N-S number.

Company name:

Company registration number:

Full address:

Full visiting address (not PO box etc):

Phone number:

Mobile number:

E-mail address:

Signatory:

Personal number:

ATTACHED DOCUMENTS

[ ]  Proof of Company Registration

[ ]  Proof of tax registration

[ ]  Proof of employment Number:

[ ]  The latest pay slip

[ ]  FORA insurance number (seven figures):

[ ]  The Company doesn’t have FORA insurance

[ ]  Helthcareagreement (if such exists)

[ ]  The Company doesn’t have Healthcareagreement

[ ]  Copy of official order and/or contract

[ ]  A1 documents for all your employees

ADDITIONAL INFORMATION: Describe the activities of your company (i.e. scaffolding, assembly work, construction)