

This form must be sent in advance and without delay to the Operations Office: ops@aeroport-brive-vallee-dordogne.com and Accounting Office: finances@aeroport-brive-vallee-dordogne.com for any changes that may affect billing

ENTITY TO BE INVOICED					
YOU ARE		<input type="checkbox"/> OWNER	<input type="checkbox"/> LESSEE	<input type="checkbox"/> BROKER	OF THE AIRCRAFT
You are an individual or a sole trader			You are a company, an association, a school, a government department,...		
TITLE (Mr, Mrs, Ms)		<input type="checkbox"/> AEROCLUB <input type="checkbox"/> TRAINING SCHOOL	<input type="checkbox"/> AIRLINE <input type="checkbox"/> MILITARY/ PUBLIC ESTABLISHMENT		
FIRSTNAME		CORPORATE NAME			
NAME		NAME OF LEGAL REPRESENTATIVE			
TRADING NAME (if company)		HEADQUARTERS POSTAL CODE – CITY COUNTRY			
BILLING ADDRESS POSTAL CODE – CITY COUNTRY		BILLING ADDRESS (if different)			
CONTACT TELEPHONE	①	CONTACT OPS	①	@	
CONTACT E-MAIL	@	ACCOUNTING CONTACT	①	@	
		COMPANY REGISTRATION NUMBER			
		VAT reg no.			
AIRCRAFT					
FIRSTNAME – NAME OF PILOT					
PLANE REGISTRATION NUMBER					
TYPE					
MTOW					
ARRIVAL DATE					

DOCUMENTS REQUIRED (According to the applicant's situation)

- Company Registration Certificate
- Bank details IBAN / BIC
- Certificate of airworthiness with indication of weight

I certify the accuracy of the above information, to have read the general terms and conditions of invoicing, and to have duly accepted them.

Date

Signature and stamp