



Return the completed form to Desoutter Tools via email at: webshop-na@desouttertools.com

Account Name:

Acct. No.:

Please complete an individual user access form for each employee that you wish to grant access to the Desoutter Tools Webshop.

Please note: * = Required Field

*First Name:

*Last Name:

*E-Mail Address:

*Phone (direct):

Phone (switchboard):

Phone (mobile):

*Fax:

*Country:

*Is Primary Language US-English?: Yes No

*If no, please specify Language Preferred:

*Will this user need access for Order Entry (if Yes, tick box below)

Order Entry (Authorized Management Signature Required Below)

NOTE: Default access to the Desoutter Tools Webshop site includes Part Number Inquiry, Order Tracking, Back-order Tracking and Invoice visibility.

I authorize the above named person to perform Order Entry functions on Desoutter Tools Webshop on behalf of our company. I understand that my company is fully responsible for any and all purchases made by this person until Desoutter Tools has been notified in writing (send to: webshop-na@desouttertools.com) Subject line: TERMINATE to terminate these privileges and I have received from Desoutter Tools acknowledging that such action has been executed.

Authorizing Management Signature/Title _____ 8 UH

(Customer Authorization Required for Order Entry Access)