"TRANSPORTGAS SRBIJA" Novi Sad Bul.oslobodjenja 5, Novi Sad

Gas year:

Registration application

Information on re	egistered entity:	
	Name:	
	Headquarters:	
	PAK:	
	Register no:	
	Tax ID:	
Information on the	he authorized person:	
	Name and last name:	
	Address for receiving mail:	
	PAK:	
	Phone number:	
	Fax number:	
	E-mail:	
Number of the de	cision on issuing the license (if the applicant is an energy entity):	
Extract on registra - A valid license for	bliged to submit with the application: tion of a business entity (issued by the Business Registers Agency) r performing energy activity if the applicant is an energy entity ion of the submitter for the person authorized to submit and receive the submission	
Date		Applicant's signature
	_	