



Breakdown Service Application

Company:

VAT No.:

Details :

Address : _____

Postcode : _____

Town : _____

Country : _____

Phone : _____ Mobile _____

Email : _____

Conditions :

- Pay - per - use service (no monthly / annual fee)
- Administrative fee - 95€ per assistance
- Term of payment- 15 days

Signed : _____ I.D. : _____

Position : _____ Date : ___/___/_____

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Authorised persons :

Name, Date Of Birth, ID, email

Name, Date of Birth, ID, email

Name, Date Of Birth, ID, email

Name, Date Of Birth, ID, email

Additional information:

N° of trucks : _____ **Brands :** _____

Trailers Type: Tilt refrigerated Cistern Others _____

Preferences workshops: Dealers Multibrands

Tyres : Michelin Premium (Bridgestone, Goodyear, Continental)

Others _____

Countries : FR ESP IT UK DE BE NL PL AT

Others _____

Notes : _____

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