



## Credentials Questionnaire: Test

Please complete the below Credentials Questionnaire for the Retailer Account and User you would like created on our Test Platform.

Please submit a separate form for each User.

**Retailer Name:**

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**Branch Name:**

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**Representative First Name:**

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**Representative Last Name:**

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**Email:**

.....

**Telephone:**

.....

**Branch Address:**

.....

**Branch Postcode:**

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