

TRANSFER CREDIT

Must be filled in by the person referred to in the Billing Details or the Legal Representative in the case of Legal Entity

Attention!!! The credit may only be transferred if the domain or the service has still not been registered and/or activated.

PLEASE USE CAPITAL LETTERS

I, Mr/Mrs/Miss _____ born on ____/____/____

in _____ Town/City (_____)

Tax Identification Number _____

Of (Full Residential Address) _____ N° _____

Town/City (_____) Post Code _____

To be filled in only if the person referred to in the Billing Details**is a Legal Entity/Self-employed person**

Legal Representative of _____

VAT Number _____

Self-employed person with VAT Number _____

the person referred to in the Billing Details of the following service, am aware that individuals who provide false information shall be punished according to the Italian penal code and relevant special laws, according to and for the purposes of art. 46 D.P.R. n. 445/2000,

**WOULD LIKE TO:
use the Credit I have with the following**

Domain/Service _____ with Order N° _____,

for this

Domain/Service _____ with Order N° _____.

Consent to the processing of personal data

I have read the Privacy Policy provided in accordance with Art. 13 of EU Regulation no. 2016/679 ("GDPR"), available at the site https://hosting.aruba.it/documents/tc-files/en/7_privacypolicyhostingcart.pdf, and agree to the processing of personal data for the purposes indicated therein aimed at fulfilling the contractual obligations correctly. I also hereby declare that I am aware that by not agreeing to such processing, the provisions indicated in said Policy may be applied.

Place _____ Date _____

Stamp and Signature _____

See attached:

- **copy of ID of the applicant**
- **In the case of Companies/Bodies/Associations: company registration certificate, company statute, notary deed, or other document which proves that the applicant is the legal owner.**

Phone Number _____

ATTENTION!! Aruba reserves the right to request further documents.