
Chemicals prohibition order form (ChemVerbotsV) for professional users or resellers



You intend to purchase substances or mixtures from us that are subject to Annex 2, Entry 1 or Entry 3 of the Chemicals Prohibition Ordinance (ChemVerbotsV). Accordingly, the intended use and the identity of the purchaser must be established in accordance with §9 Para. 2 ChemVerbotsV.

Therefore, please send us the completed form together with possible documents by e-mail, mail or file upload via: https://www.bechem.de/de_en/chemverbotstv.html
After that your order will be processed.

Customer number:

Material number:

Identity verification

We require the following information from you:

Company name:

Address 1:

Address 2:

Sales tax identification number:

or other company identification number:

Responsible person:

E-mail:

Phone:

Fax:

Commercial/
business activity:

Intended use
of the material:

An **excerpt** from the **trade register or commercial register** is enclosed: yes no

Proof of use

Please confirm the respective points by checkmarking them:

You assure that a correspondingly authorized receptionist will be available to receive the goods ordered and that receipt will be duly confirmed: yes no

You are informed about:

- the hazards associated with the use of the substances or mixtures,
- the necessary precautions to be taken in case of intended use and in case of accidental spillage or release; and
- on proper disposal: yes no

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For professional users

You are a professional user and confirm that you will not resell or dispense the substances or mixtures: yes no

You only use these substances and mixtures only in an **authorized manner** in accordance with the stated intended use and fulfil the legal requirements for this: yes no

For resellers

You are a reseller and confirm that you meet the legal requirements for reselling or supplying the substances or mixtures: yes no

Permission or notification is available (Annex 2 Entry 1 ChemVerbotsV): yes no

You have the appropriate number of competent and instructed employees (Annex 2 Entry 3): yes no

With your signature you expressly confirm the correctness of the information given above and that you will immediately inform us in writing of any change of user, place of use, application as well as facts which call into question your status as a professional user or reseller without being asked to do so.

Place, date:

Signature of responsible person (with company stamp):