

Order form

Full name

in capitals

Please return this	document to	events@to	ndays	logistics.n
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		to <u>events@todayslog</u>									
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Show name											
Exhibitor's r	name										
Hall and sta	nd number										
On site conf	tact person										
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City						Zip code					
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Telephone i											
Email addre											
applicable to	companies in the	European Union									
Shipment	details										
Amount /	Type of shipm	ient	Length	Wi	idth	Height	Weight	Imag	ge	Domari	
number	(pallet, crate,		(cm)	(cr	m)	(cm)	(kg)	encl	osed?	Remark	(S
			1								
Forklift sei	rvices										
□ Unloadin	g direct to stand	d			Date	and time	ġ				
	g via warehouse				Date and time in warehouse						
	-	urier shipments)			Date and time in warehouse						
(pick tills of	otion also for cor	arier simplifients)			Date	z dila tillic	. on stand				
☐ Storage of empty packing material Normal Priority					Approx. volume in cbm				± cbr		
☐ Storage of empty packing material High Priority					Approx. volume in cbm				± cbr		
□ Storage of Full Goods					Approx. volume in cbm				± cbr		
_ 0.0.080											
☐ Reloading direct from stand				Date and time							
☐ Reloading via advanced warehouse			Date and time from stand								
- Reloduii	is via advanced	Waremouse			Date	e and time	ex wareh	ouse			
	vices										
Other serv		oort			□ Re	oad	□ Air		□ Sea	Г	☐ Courier
Other serv	anuact tar tranci	☐ Quote request for transport ☐ Customs clearance				If yes, we will contact you for the correct documents					
☐ Quote re					If wo	c we will	contact vo	uu tar t	tha car	ract dacu	monte

Union. If you have any questions or need further information, please feel free to contact us. We will be more than happy to assist you.

Signature

Date