

LOGISTICS EXHIBITION ORDER FORM

Please return order form by **May,17th**:

Schenker Deutschland AG

Karlsruher Str. 10

30519 Hannover

Ms. Nicole Peters

Fax: +49 511 87 005 450

Tel: +49 511 87 005 400

nicole.peters@dbschenker.com

Exhibitor details (company name / address / booth no):

Onsite contact name:

Mobile phone:

ISC booth number:

For individual requirements please contact Schenker Hannover directly!

Please choose one of the following three options:

1. QUOTATION REQUEST

Please provide a quotation based on below mentioned shipment details.

2. ORDER CONFIRMATION

We herewith order from Schenker Deutschland AG, Hannover to arrange all necessary logistics services and the customs formalities (if required) to / from our exhibition booth at ISC 2017:

Collection address:

Pick-up date at our premises:

Pick up time frame:

Tail-lift required for pick up: yes no

3. OWN TRANSPORT ARRANGEMENTS

The transport to the destination mentioned in the Shipping Guidelines will be arranged by our own contractor respecting the arrival deadlines.

Name of contractor:

Estimated date of arrival:

SHIPMENT DETAILS (please complete this section no matter which of the three a.m. options you chose):

No. of pieces	Kind of packing	Gross weight kg	Dimensions (lxwxh) cm	Remarks

MOVE IN: Requested delivery date / time to booth:

Empty case storage required: yes no

MOVE OUT: Return to the collection address: yes no

SPV INSURANCE: SpV liability insurance cover required for a value of:
We have an own transport insurance and do not pay SpV.

BILLING: All occurring service charges are to be billed to our a.m. address: yes no

REMARKS:

(e.g. special requirements,
different billing address,
etc.)

DATE:

ORDERED BY (NAME):

PHONE: