

CUSTOMER: _____ **CONTACT PERSON:** _____
STREET: _____ **TELEPHONE/MOBILE:** _____
ZIP CODE/LOCATION: _____ **E-MAIL:** _____

DELIVERY REQUIREMENTS: EXW FOB DAP DDP CFR other: _____

TYPE OF TRANSPORTATION: Export Import Destination: _____

KEY DATES: pick-up beginning: _____ delivery until: _____

LOADING ADDRESS: _____
street, ZIP code, city, country

DELIVERY ADDRESS: _____
street, ZIP code, city, country

CONSIGMENT DATA:

type of packaging	quantity	dimensions (LxWxH) in cm	weight in kgs	cargo description

EXPORT DOCUMENTS: Carnet-ATA Shipper's declaration cargo insurance
 Proforma invoice export declaration

OTHER SERVICES: Transport-packaging storage loading/removal

OFFER PROCESSING: all-inclusive offer date of inquiry _____

OTHER INSTRUCTIONS: _____

