



ORDER FORM

LIFTING - STORAGE - FREIGHT



Please indicate the services below which you require from the official Freight and Lifting Contractor

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|----|---|---|----------------------|
| 1) | Receive goods into warehouse before / after show | Date of arrival | <input type="text"/> |
| 2) | Unloading from vehicle direct to stand | Date and time of arrival | <input type="text"/> |
| 3) | Reloading to vehicle direct from stand | Date and time of collection | <input type="text"/> |
| 4) | Removal, storage and redelivery of empty cases | | <input type="text"/> |
| 5) | Storage of full goods (i.e Tool Boxes, Ladders, Products for stand) | | <input type="text"/> |
| 6) | Labour for help on stand (i.e help in unpacking / repacking) Unskilled | | <input type="text"/> |
| 7) | Re-lifting on stand for erection / dismantling or positioning | | <input type="text"/> |
| 8) | International and Domestic transportation from your location to venue
and return via | AIR <input type="checkbox"/> SEA <input type="checkbox"/> ROAD <input type="checkbox"/> | <input type="text"/> |
| 9) | Customs Clearance formalities for Export & Import | Value for Customs Purposes | <input type="text"/> |

Description of Exhibits / Cases - Please indicate the Length - Width - Height and Weight of each item:

Value of your consignment for our Insurance purposes:	Would you like a separate quotation for Insurance?
	YES <input type="checkbox"/> NO <input type="checkbox"/>

THERE ARE NO CREDIT FACILITIES AVAILABLE

I hereby authorise you to debit my credit card for the full amount:

Mastercard / Visa	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry Date	<input type="text"/>	Security number (last 3 digits only)	<input type="text"/>
Card Holder's Name.....	Card Holder's Signature.....		
Address.....			

PLEASE COMPLETE YOUR DETAILS BELOW

Exhibitors Name.....			
Hall	Stand No.....	Date Required on stand.....	
Address			
Postcode.....	Contact on stand.....		
Email	Telephone.....		
Fax:	Mobile of person on stand.....		

Please complete and return to: Email : horst@dhl-exh.com
 Telephone : + 44 (0) 121 782 4626 Fax : + 44 (0) 121 782 4680

www.dhl-exh.com

Deadline for return of order form:	06 August 2010
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Any work carried out before 0800 or after 1800 on weekdays, or anytime during a Saturday is subject to 50% Surcharge.
 For work carried out on a Sunday will be subject to 100% Surcharge.

All our business is transacted under B.I.F.A conditions that may exclude or limit our liability