TIMESLOT REQUEST FORM



Exhibitor: at ICNC 2013 Berlin:							OGISTICS EXHIBITIONS
Booth no.:							
Contractor contact details:							
Company Na	me:						
Contact:							
Phone:							
Fax:							
e-mail:							
We would like	to have follow	ving unloadi	ing an	nd reloading	slots:		
Build up	Date:	Date:		Dismantling	Date:		
	Time:			Dismanting	Time:		
	VICES NEEDED e whether you ails				O / UNLOA	DING 🗆 YE	S 🗆 NO
Groupage		Transit Van		part load trailer		full load trailer	
No. of pieces		Size:		Loadingmeters:		No. of Trailers	
Total gross weight			kgs	Volume (in	cbm)		Cbm
Please send this form latest		on 22nd April 20		ril 2013	to one of	the following	contacts:
Fax: . 40 00							
+49-30-	44 03 47 79	e.	-mail:	anja.hom	ann@faiı	exx.de	
Any Form recie				anja.hom		exx.de	
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