

**LOGISTICS EXHIBITION ORDER FORM**

**Please return order form by May 23<sup>rd</sup>:**

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](mailto: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 2018:

Collection address:

Pick-up date at our premises:

Tail-lift required for pick up:            yes

Pick up time frame:

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:**