

see below

Order Form

Empties

You will find further information at section 4.4.1.11 of the Technical Guidelines

Hall/Stand number:

Event:

C 12
GB

2022

Logistics

C 12

We enlist the services of the official forwarding contractor of Messe Düsseldorf as ticked below. Please submit this form to the chosen company.

KÜHNE + NAGEL (AG & Co.) KG
KN Expo & Event Logistics
Stockumer Kirchstraße 61
40474 Düsseldorf
Phone: +49 211 454680
Fax: +49 211 434549
e-mail: exposervice.duesseldorf@kuehne-nagel.com
<http://www.kuehne-nagel.com>

SCHENKER Deutschland AG
Geschäftsstelle Düsseldorf – Messe –
Stockumer Kirchstraße 61
40474 Düsseldorf
Phone: +49 211 43628-0
Fax: +49 211 43628-61
e-mail: fairs.duesseldorf@dbschenker.com
<http://www.schenkerfairs.de>

We apply for storage of the following	Requested date of pickup	Type	m ³	Piece
Cases, crates				
Pallets				
Others (e.g. mesh boxes)				

Collection of empty packing material, labelling, storage on site for the duration of the exhibition, move-out of warehouse and redelivery after the closing of the exhibition, including all extra and supplementary charges per m³ € 46.50 net + V.A.T. per m³ per container/packaged item or part of a m³ (Minimum 2 m³), plus forwarding insurance.

Note

1. Empties are completely empty packaging items, which will be invoiced as such. Packaging materials must be transportable, if necessary bundled together, and be made available on the stand. The price shall refer to empties exclusively. No liability is accepted for any goods/materials left inside any (empty) packing materials.
2. All empties must be marked with the company's address, hall and stand-no. Otherwise, a proper return cannot be guaranteed.
3. The Exhibition forwarders liability ends with the delivery of the empty packages to the exhibitors booth, even if the exhibitor or his representative is not present.

<p>Name of the company _____</p> <p>Street _____</p> <p>Postal code and place _____</p> <p>Country _____</p>	<p>Contact _____</p> <p>+ _____</p> <p>Telephone _____</p> <p>+ _____</p> <p>Telefax _____</p> <p>Email _____</p>
<p>I will pay with: <input type="checkbox"/> Credit card <input type="checkbox"/> Account/Bank transfer</p> <p>Credit card Number: _____</p> <p>valid until: _____</p>	
<p>Due within 14 days from date of invoice. The forwarding agent reserves the right to change the payment terms with prior notice.</p>	
<p>I am an entrepreneur as defined by the law on turnover tax.</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>V.A.T. Registration No.: _____</p>	<p>_____</p> <p>Company Stamp, date, signature</p>