



QUOTE REQUEST FORM

FAIREXX Logistics for Exhibitions GmbH
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EXHIBITION

Exhibitor

Booth No.

Company name

Address

Postcode and City

Country

Phone

Email

VAT No.

PRE-EVENT-INFORMATION

No. of packages

Gross weight

Measurements in cm

Transport from

Mode of transport

Customs clearance

Date delivery on stand:

Goods Value / Currency:

Transport insurance:

Country, ZIP code, Town:

Airfreight* Seafreight* Courier* Road

Temporary import Definitive import Carnet ATA

yes no

** Please send a copy of air waybill or waybill*

POST-EVENT-INFORMATION

Return transport

To be arranged by

Yes, to origin Yes, but to other address No

Fairexx Other: _____

Other services requested at fairground:

Please return answer to: ↓

Date

Signature