



return to office@iml-vienna.at

IML – Messe Logistik GmbH
Bruno Kreisky Platz 1, Austria Center Vienna, A-1220 Wien

ORDER FORM DIRECT DELIVERY TO VENUE (without storage)

Congress / Exhibition name	Venue
Exhibitor name	Hall / Booth no.
Contact person at the booth	Mobil no.

REQUESTED COMPANY

Full company name	Contact person
Telefon nbr.	E-mail

SHIPMENT INBOUND

SHIPMENT OUTBOUND

<input type="checkbox"/> Full truck load / 13,6 loading meter	<input type="checkbox"/> Full truck load / 13,6 loading meter
<input type="checkbox"/> Half truck load / 7 loading meter	<input type="checkbox"/> Half truck load / 7 loading meter
<input type="checkbox"/> Part shipment / other:	<input type="checkbox"/> Part shipment / other:

SERVICE INBOUND

SERVICE OUTBOUND

<input type="checkbox"/> Truck unloading and <u>direct</u> delivery to stand	<input type="checkbox"/> Pick up from stand and <u>direct</u> truck loading
<input type="checkbox"/> Only TIMESLOT booking / no service needed	<input type="checkbox"/> Only TIMESLOT booking / no service needed
<input type="checkbox"/> Following service needed:	<input type="checkbox"/> Following service needed:

DATE & TIME REQUEST INBOUND

DATE & TIME REQUEST OUTBOUND

MOVE IN (date & time)	MOVE OUT (date & time)
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ADDITIONAL DETAILS

<input type="checkbox"/> Empty storage needed	approx. empties:	cbm
Additional information / instructions		

INVOICE DETAILS

Company Name		VAT No. (only for EU Countries)	
Address	City	Zip Code	Country

TERMS OF PAYMENT

<input type="checkbox"/> I will manage the payment via Online Link – Credit Card Payment Link (you will receive the Link together with our invoice)
<input type="checkbox"/> I hereby authorize the use of the following credit card for payment
<input type="checkbox"/> I hereby authorize the use of the following credit card as a security against non-payment in full within 14 days of invoice date

CREDIT CARD DETAILS

Visa Mastercard American Express

Cardholder Name	Card Account Number
Expiry Date	CVC

Date	Printed Name	Signature
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