



[return to iec@iml-vienna.at](mailto:iec@iml-vienna.at)

## ORDER FORM VIA ADVANCED WAREHOUSE

|                                    |                         |
|------------------------------------|-------------------------|
| <i>Congress / Exhibition name</i>  | <i>Venue</i>            |
| <i>Exhibitor name</i>              | <i>Hall / Stand no.</i> |
| <i>Contact person at the booth</i> | <i>Mobil no.</i>        |

### INBOUND

|   |  |
|---|--|
| <input type="checkbox"/> <b>door to booth service</b><br><small>(incl. Transport organized by IML)</small>  | <input type="checkbox"/> <b>booth to door service</b><br><small>incl. Transport – organized by IML</small>                           |
| <input type="checkbox"/> <b>only local handling via advanced warehouse</b><br><small>(Transport with your local carrier to our warehouse)</small> | <input type="checkbox"/> <b>via warehouse after show only</b><br><small>(pick up from our warehouse with your local carrier)</small> |
| <i>Shipper</i>  | <i>Consignee</i>   |
| <i>Contact details (Name / Phone / Mail)</i>  | <i>Contact details (Name / Phone / Mail)</i>   |
| <i>Shipment details pieces / dimensions (cm) / weight (kg) / etc.</i>   | <i>Shipment details pieces / dimensions (cm) / weight (kg) / etc.</i>  |
| <i>Carrier / Trucker &amp; Tracking no.</i>   | <i>Collection from stand (date &amp; time)</i>   |
| <i>Tracking no. / AWB no. / etc.</i>  | <i>Pick up date from warehouse IML (apprx.)</i>  |
| <i>Arrival date warehouse IML (apprx.)</i>  | The pick up from warehouse IML can not be made on the same day as the stand collection. Only possible by separate agreement.         |
| <i>Delivery to stand ( date &amp; time )</i>  | <i>Carrier / Trucker</i> which will pick up the goods from IML warehouse   |
| <i>Additional information / instructions</i>  |  |

### INVOICE DETAILS

|                     |             |  |                |
|---------------------|-------------|--|----------------|
| <i>Company Name</i> |             | <i>VAT No. (only for EU Countries)</i> |                |
| <i>Address</i>      | <i>City</i> | <i>Zip Code</i>                        | <i>Country</i> |

### 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  |

### CREDIT CARD DETAILS

☐ Visa ☐ Mastercard ☐ American Express

|                        |                            |
|------------------------|----------------------------|
| <i>Cardholder Name</i> | <i>Card Account Number</i> |
| <i>Expiry Date</i>     | <i>CVC</i>                 |

|             |                     |                  |
|-------------|---------------------|------------------|
| <i>Date</i> | <i>Printed Name</i> | <i>Signature</i> |
|-------------|---------------------|------------------|