

FORM A

Local Transport Service Booking Form

Exhibitor Billing Address		Exhibitor	
Company Name:		Exhibitor Company Name:	
Street:		Venue:	
Suburb / Town:		Hall:	
Post Code:		Stand Number:	
Phone Number:		On-site Contact:	
Email:		Mobile Number:	
Contact Person:		Preferred Delivery Date/Time to Stand:	

ITB Asia 2024 - 23 to 25 Oct – Marina Bay Sands Expo & Convention

Please return this form by: 6 Oct 2024

Pick-Up Address <i>(if different from above)</i>	Forklift Available at Pick-Up Premises? <i>(check one)</i>
	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date/Time Freight is Ready For Pick-up <i>(Charges may apply for collection after set deadline)</i>	Return Transport Required? <i>(check one)</i>
	<input type="checkbox"/> Yes <input type="checkbox"/> No

No. of pieces	Type of Unit <i>(Carton, pallet, crate, etc.)</i>	Length <i>(L)</i>	Width <i>(W)</i>	Height <i>(H)</i>	Weight <i>(kg)</i>	Cubic Metres <i>(cbm)</i>	Commodity <i>(Description of contents)</i>	Dangerous Goods? <i>(check one)</i>
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
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								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No

Transport Insurance? <i>(check one, charges apply)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Value of Goods (SGD)	
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On-Site Services <i>(check all that apply)</i>		
<input type="checkbox"/> Forklift <i>(other than first positioning to stand)</i>	<input type="checkbox"/> Accessible Storage / Retrieval <i>(event time)</i>	<input type="checkbox"/> Empties Storage <i>(event time)</i>
<input type="checkbox"/> Crane <i>(detail in comments)</i>	<input type="checkbox"/> Labour Details <i>(detail in comments)</i>	<input type="checkbox"/> Additional Services <i>(detail in comments)</i>

Comments / Special Instructions:

ACCEPTED BY CUSTOMER (name print / signature)

DATE

Your Schenker Contacts are: Raymond Chin/ Serena Chew
 Mobile: +65 9690 1569 / +65 9680 0977
 Email: raymond.chin@dbschenker.com / serena.chew@dbschenker.com