

Order form for floor covering



Return: Immediately but not later than 4 weeks before the start of the event

Correct as of: 01/2017

Hamburg Messe und Congress GmbH
Customer service
PO box 30 24 80
D-20308 Hamburg

Phone +49 40 3569-7575
Fax +49 40 3569-2138
customerservice@hamburg-messe.de

Event: _____ Hall/Stand no.: _____

Date of event: _____ Exhibitor: _____

We are ordering on our own behalf

We are ordering on behalf of the exhibitor. Please issue the invoice to:

Billing address:

Invoice amendments which arise due to incomplete, or incorrect information (billing address, missing purchase order number, etc.) after the start of the event will only be carried out subject to a fee of EUR 50.00

Company name: _____

Street/PO box: _____

Postcode/town: _____ Country: _____

Contact: Mr. Ms. _____

E-mail: _____

E-mail for electronical invoicing: _____

Phone: _____ Mobile: _____

Fax: _____

Order no. (e.g. SAP, Oracle): _____

privat person

registered entrepreneur (or legal entity with VAT-Reg.-No.)

VAT reg.-No.:

Commercial/Company Reg.-No. (non-EU): _____

The order is placed subject to the acceptance of the following terms

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Stand organisation:

Size of stand: _____ X _____ = _____ sq m

row stand corner stand front stand island stand

Please have the floor covered by approx. Date: _____ Time: _____ o'clock.

Floor coverings:

Item	Description	m ²	Price EUR per m ²
2103201	Carpet, Rib weave, incl. foil cover and removal <input type="checkbox"/> black (2103201) <input type="checkbox"/> yellow (2103213) <input type="checkbox"/> orange (2103211) <input type="checkbox"/> light blue (2103214) <input type="checkbox"/> grey (2103204) <input type="checkbox"/> kobalt (2103205) <input type="checkbox"/> granite (2103216) <input type="checkbox"/> emerald (2103207) <input type="checkbox"/> gras green (2103215) <input type="checkbox"/> dark red (2103209) <input type="checkbox"/> red (2103210) <input type="checkbox"/> different colours on request: _____	_____	8,65
2103272	Carpet, Velour, incl. foil cover and removal <input type="checkbox"/> black (2103272) <input type="checkbox"/> dark grey (2103273) <input type="checkbox"/> saphir blue (2103270) <input type="checkbox"/> dark blue (2103271) <input type="checkbox"/> ivory (2103274) <input type="checkbox"/> richelieu red (2103275) <input type="checkbox"/> different colours on request: _____	_____	15,14
2103220	Carpet, Needle felt, incl. foil cover and removal <input type="checkbox"/> black (2103220) <input type="checkbox"/> granite (2103221) <input type="checkbox"/> grey (2103222) <input type="checkbox"/> white (2103228) <input type="checkbox"/> yellow (2103229) <input type="checkbox"/> red (2103227) <input type="checkbox"/> light blue (2103260) <input type="checkbox"/> gras green (2103262) <input type="checkbox"/> emerald (2103266) <input type="checkbox"/> kobalt (2103263) <input type="checkbox"/> dark red (2103264) <input type="checkbox"/> orange (2103265) <input type="checkbox"/> different colours on request: _____	_____	9,73
2103240	PVC, incl. foil cover and removal <input type="checkbox"/> dark grey (2103242) <input type="checkbox"/> white (2103243)	_____	24,87
2103250	Turf, indoor	_____	10,82

The prices quoted above are net prices which are subject to value added tax.

Your contact for this service:
C.T.S. - Carpet Tiles Service
 Messerschmittstr. 25, D-53925 Kall
 Phone 02441-771660, Fax: 02441-7716625, E-Mail: mail@cts-fairteam.de

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Other conditions:

1. Complaints must be made by the first day of the event and will only be met by amendments. 2. Prices cover rental of the material supplied as well as assembly and dismantling, safety maintenance on all event days, all transport and storage for the duration of the event. 3. No charge shall be made for cancellations up to four weeks before the start of the event (determined by date on which notice of cancellation is received by organiser). The full price shall be charged if notice of cancellation is received after this cut-off point. Notice of cancellation must always be given in writing. 4. The prices quoted shall apply until four weeks before the start of the event (order deadline). **An express surcharge of 20% shall apply after this deadline.** 5. Invoice amendments which arise due to incomplete, or incorrect information (billing address, missing purchase order number, etc.) after the start of the event will only be carried out subject to a fee of EUR 50.00. 6. Invoices are payable immediately on receipt and encompass the services actually rendered on site. These will be documented separately in the case of deviations. Your payments should indicate the event, invoice number, reg. number and/or stand number at the Hamburg Messe und Congress GmbH, and should be paid to account number 0228 130 000 at the HSH Nordbank AG, sort code 210 500 00, BIC: HSHNDEHH IBAN: DE10 2105 0000 0228 1300 00. 7. For services that involve the renting out of items, the customer shall be held liable from the start of the delivery of the rental item to the trade fair/exhibition stand; the liability for the rental item shall end with the collection of the rental item by the service partners, even if the customer already left the stand. (see form insurance). 8. The organiser has the right to engage qualified third parties (sub-contractors, freelancers) as vicarious agents to assist in carrying out individual services in part or in whole, if this is in the interests of the exhibitor. This does not constitute a contractual relationship between the exhibitor and the third party. 9. The place of jurisdiction for both parties shall be Hamburg. 10. Furthermore, our General Terms and Conditions for Services (see www.hamburg-messe.de/downloads or www.cch.de/download) are part of the contract.

Place, date

Legally binding signature and company stamp

If you would like to pay by credit card please provide the following information:

Yes, we will pay by credit card.

only this order

this order and all other subsequent orders

EUROCARD/MasterCard VISA Diners AMERICAN EXPRESS

Card number: _____ Card verification number: _____

Expiry date: _____ Cardholder: _____

Place, date

Legally binding signature