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| **CONTACT INFORMATION FORM** |
| When you ask us to take care of your relocation we kindly request you to fill in this form and return it to us. |
|  |
| Client | Account | Job number |
|  |
| **Loading address / details****7 Recanati Street, apartment 5****Tel Aviv** | **Address of destination / details****20 Newtown Abbey****Trim, County Meath****C15 YF51****Ireland** |
| Phone 1 | +972 052 9519495 | Phone 1 | +972 052 9519495 |
| Phone 2 |  | Phone 2 |  |
| Phone cell |  | Phone cell |  |
| Facsimile |  | Facsimile |  |
| Email (very important) | Robert.boisvert@strauss-group.com | Email (very important) | Robert.boisvert@strauss-group.com |
| Date you depart from this address | June 30, 2025 | Date you arrive at this address | June 30, 2025 |
|  |
| It is very important that we ( or our agent) know where we can reach you during transit of your shipment. Please advise details below. You can, for instance, also give us the address of an employer or relatives where you will be staying. |
| Contact address / details 1)**20 Newtown Abbey****Trim, County Meath****C15 YF51****Ireland** | Contact address / details 2) |
| Phone 1 | +972 052 9519495 | Phone 1 |  |
| Phone 2 |  | Phone 2 |  |
| Phone cell |  | Phone cell |  |
| Facsimile |  | Facsimile |  |
| Email (very important) | Robert.boisvert@strauss-group.com | Email (very important) |  |
| We can reach you at this address from - till |  | We can reach you at this address from - till |  |
|  |
| Request date(s) of loading | June 29th, 2025 |
|  |
| Timing of shipping of your goods | **A.S.A.P. AFTER PACKING** | **AT MY CALL** | **ON A CERTAIN DATE:** |
|  |
| Service requested |  |  | **FULL-SERVICE INTO NEW RESIDENCE** |
|  |
| PlaceTel Aviv | DateJune 9, 2025 | Signature |