



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 Julia Anielli	Account	Job number
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Loading address / details Burla 36 Tel Aviv		Address of destination / details Badenih 2 17000 Prague 7	
Phone 1		Phone 1	
Phone 2	+972 54 565 1267	Phone 2	+972 54 565 1267
Phone cell		Phone cell	
Facsimile		Facsimile	
Email (very important)		Email (very important)	
Date you depart from this address		Date you arrive at this address	

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) Badenih 2 17000 Prague 7		Contact address / details 2) Badenih 2 17000 Prague 7	
Phone 1		Phone 1	
Phone 2		Phone 2	
Phone cell	+972 54 565 1267	Phone cell	+972 54 565 1267
Facsimile		Facsimile	
Email (very important)		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	14/7/19
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Timing of shipping of your goods	A.S.A.P. AFTER PACKING	AT MY CALL	ON A CERTAIN DATE:
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Service requested	FULL-SERVICE INTO NEW RESIDENCE
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Place Tel Aviv	Date 14/7/19	Signature
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