



REQUEST FOR OFFER

fair equipment

Data of Costomer:

Company: _____

Adress: _____

Phone: _____

Fax: _____

Person in charge: _____

Event Decription:

Sort of evenet: _____

Place of event: _____

Begin date: _____

End date: _____

NECESSARY EQUIPMENT:

1. Mounting halls

• Area [m²] _____

• Width [m] _____

• Length [m] _____

2. Object type „pagoda“ 5 x 5 m

• No of [pc.] _____

3. Floors

• Total area [m²] _____

4. Sanitary containers

• Men's [pc.] _____

• Woman's [pc.] _____

5. Other equipment

• Table [pc.] _____

• Chairs [pc.] _____

• Electro switchboard
24 KVA 60 KVA 150 KVA [pc.] _____

6. Other necessary equipment (write in): _____

Please submit your request through this form via fax: +387 32 247 773

Signature: