



Return Form to:

APT Showfreight (Thailand) Limited

98/7-8 Yannawa Road, Chongnonsee,

Yannawa, Bangkok 10120, Thailand

Tel : +66 (0) 2165 6152 Fax : +66 (0) 2165 6159

Attn: Ms Darunee Ngaosi

Email: [darunee@aptshowfreight.com](mailto:darunee@aptshowfreight.com)

**FORM**

**DEADLINE : 16 July 2018**

**FREIGHT INSTRUCTION**

*This form must be completed and returned by every exhibitor. If service is not required, please endorse 'NOT APPLICABLE' and return / fax to the address above.*

PLEASE TYPE / WRITE IN BLOCK LETTERS

Company Name : \_\_\_\_\_ Booth No: \_\_\_\_\_

Address : \_\_\_\_\_

Tel: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_

Authorised by (Signature) : \_\_\_\_\_ Date : \_\_\_\_\_

We appointed APT Showfreight (Thailand) Limited an Official Forwarding Agent and On-Site Installation Contractor that we will be shipping the following for the event, and we instruct APT to customs clear and deliver the goods to our stand:

No. of Pieces	Description of Contents	Dimensions (meters)	Weight (kg)

We also note and understand the following:

**1. DEADLINE FOR SHIPMENT**

Receipt of documents for seafreight consignments

25 July 2018

Receipt of documents for airfreight consignments

1 August 2018

Arrival of seafreight consignments

1 August 2018

Arrival of airfreight consignments

8 August 2018

Arrival of Films & Video Tapes

8 August 2018

**2. CONSIGNMENT INSTRUCTIONS**

APT SHOWFREIGHT (THAILAND) LIMITED  
98/7-8 YANNAWA ROAD, CHONGNONSEE,  
YANNAWA, BANGKOK 10120 THAILAND

**3 INSURANCE**

It is the responsibility of each exhibitor to arrange Marine (Transport) Insurance covering transport to the exhibition, during the exhibition, and the return of the exhibits to domicile, including the period the exhibits are handled by APT Showfreight (Thailand) LTD and also ensure that Transport Insurance is arranged for exhibits sold locally.

We also inform APT Showfreight (Thailand) Limited that we will be using the services of the company below to freight our exhibits from (country). \_\_\_\_\_ Name of Freight Forwarder from origin : \_\_\_\_\_

Contact Person: \_\_\_\_\_ Tel : \_\_\_\_\_

Fax : \_\_\_\_\_ Email : \_\_\_\_\_