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Formular comanda

Ordonator comanda:

Denumire companie:	Cod client:
Cod fiscal:	Reg.Com:
Adresa:	Localitate:
Cod postal:	Tel mobil:
Persoana de contact:	Tel/Fax:
Email:	#Ref. int.:
Adresa de facturare:	

Expeditor:

Denumire companie:	Localitate:
Adresa:	Tel mobil:
Cod postal:	Tel/Fax:
Persoana de contact:	
Email:	

Destinatar:

Denumire companie:	Localitate:
Adresa:	Tel mobil:
Cod postal:	Tel/Fax:
Persoana de contact:	
Email:	

Serviciu solicitat:

Curierat: <input type="checkbox"/>	Retur:	CMR <input type="checkbox"/>	Facturi <input type="checkbox"/>
Aerian: <input type="checkbox"/>			
Rutier: <input type="checkbox"/>			
Maritim: <input type="checkbox"/>			

Detalii transport:

Nr.bucati: plic colet palet container

Dimensiuni (cm) si greutate (kg):

Lungime	<input type="text"/>	x Latime	<input type="text"/>	x Inaltime	<input type="text"/>	Greutate bruta (kg):	<input type="text"/>
Lungime	<input type="text"/>	x Latime	<input type="text"/>	x Inaltime	<input type="text"/>	Greutate bruta (kg):	<input type="text"/>
Lungime	<input type="text"/>	x Latime	<input type="text"/>	x Inaltime	<input type="text"/>	Greutate bruta (kg):	<input type="text"/>
Lungime	<input type="text"/>	x Latime	<input type="text"/>	x Inaltime	<input type="text"/>	Greutate bruta (kg):	<input type="text"/>
Lungime	<input type="text"/>	x Latime	<input type="text"/>	x Inaltime	<input type="text"/>	Greutate bruta (kg):	<input type="text"/>

Produse periculoase: da nu Specificati numarul UN _____

Data la care poate fi preluat transportul: ____/____/____

Alte informatii utile:

Contact:

Pentru procesarea comenzii in cel mai scurt timp posibil, va rugam sa returnati acest formular folosind adresa de email: office@xps-line.com sau fax2mail: **0356-818.306** .

Data comenzii: ____/____/____
Semnatura si stampila ordonatorului: