|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Form for the carrier** | |  |  |  |  |
|  |  |  |  |  |  |
| **Company** |  | | | | |
| **Address** |  | | | post code |  |
| **VAT** |  | | | | |
| **Contact person** | | name: | | | |
| mail: | | | |
| phone: | | | |
| **Poland license** |  | attachment | | | |
| **UE license** |  | attachment | | | |
| **Carrier insurance** |  | attachment | | | |
| **Exclousion of insurance** |  |  | | | |
| **Confirmation of insurance payment** |  |  | attachment | | |
|  | | | | | |
| **Vehicle data** |  | number: | | euro |  |
| **Acces to gps** | |  | | | |
| **Semi-trailer data** |  | numer: | | | |
|  | curtain | container | isotherm | cooler | platform |
| dimensions lengh/width/height | |  | | |
| equipment | belts: mats: beams: other: | | | |
| type of loading | | top | side | back |
|  | | | | | |
| **Driver data:** |  |  | | | |
|  | name | |  | | |
| surname | |  | | |
| experience | |  | | |
| phone | |  | | |
| ID number | |  | | |

The completed form and attachments should be sent to the following e-mail address:

[krzysztof.debowski@logit.com.pl](mailto:krzysztof.debowski@logit.com.pl)