



Business Company: ABF, a.s.  
Registered office: Mimoňská 645,  
190 00 Prague 9 - Prosek

Company Reg. No.: 63080575, Tax Id. No.: CZ63080575  
Registered by Municipal Court in Prague, Section B, File no. 3309  
Bank Details: Expobank CZ a.s., Account No. 5085320021/4000  
IBAN: CZ72400000005085320021, SWIFT: EXPNCZPP  
Tel: +420 225 291 185  
E-mail: yunusmetov@abf.cz, Internet: www.abf.cz, www.pvaexpo.cz

## Binding Application Form for Participation of the Firm - General Agreement

**FOR HABITAT • FOR FURNITURE  
DESIGN SHAKER • FOR GARDEN**

PVA EXPO PRAGUE, 23-26 March 2017

**Closing deadline for orders is 31 January 2017**

FOR HABITAT       FOR FURNITURE       DESIGN SHAKER       FOR GARDEN

### EXHIBITOR

**Company name** \_\_\_\_\_ Reg. No. \_\_\_\_\_  
Registered office\* - street \_\_\_\_\_ Tax ID. No. \_\_\_\_\_  
Town \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Company telephone no. \_\_\_\_\_ Company e-mail address \_\_\_\_\_  
Company fax no. \_\_\_\_\_ Internet \_\_\_\_\_  
Contact person \_\_\_\_\_ Position \_\_\_\_\_  
Tel./mobil \_\_\_\_\_ E-mail\*\* \_\_\_\_\_  
Mailing address, if different from the registered office \_\_\_\_\_  
Email for sending invoices electronically \_\_\_\_\_

**REPRESENTATIVE OF THE EXHIBITOR** (To be completed only in the case when the Exhibitors ask assurance of their participation through a representative, including all invoicing and correspondence)

**Company name** \_\_\_\_\_ Reg. No. \_\_\_\_\_  
Registered office\* - street \_\_\_\_\_ Tax ID. No. \_\_\_\_\_  
Town \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Company telephone no. \_\_\_\_\_ Company e-mail address \_\_\_\_\_  
Company fax no. \_\_\_\_\_ Internet \_\_\_\_\_  
Contact person \_\_\_\_\_ Position \_\_\_\_\_  
Tel./mobil \_\_\_\_\_ E-mail\*\* \_\_\_\_\_  
Mailing address, if different from the registered office \_\_\_\_\_  
Email for sending invoices electronically \_\_\_\_\_

\* For natural persons (individuals) please state the place of business.

\*\* This must be filled in for the sending of the position, assembly instructions, etc.

EXHIBITION AREA			Price in CZK/m <sup>2</sup> according to the application date			Fill in dimensions in whole metres		
			by 15-11-2016	by 31-12-2016	from 1-1-2017	width - length	depth	total m <sup>2</sup>
Indoor exhibition area (min. 9 m <sup>2</sup> )	Row	9-29 m <sup>2</sup>	1,600	1,900	2,200			
		30-59 m <sup>2</sup>	1,400	1,700	2,000			
		60 and more m <sup>2</sup>	1,200	1,500	1,800			
	Corner	9-29 m <sup>2</sup>	1,800	2,100	2,400			
		30-59 m <sup>2</sup>	1,600	1,900	2,300			
		60 and more m <sup>2</sup>	1,400	1,700	2,000			
	U-shape	50-99 m <sup>2</sup>	1,500	1,800	2,100			
		100 and more m <sup>2</sup>	1,300	1,600	1,900			
	Island	60-99 m <sup>2</sup>	1,600	1,900	2,200			
		100-199 m <sup>2</sup>	1,400	1,700	2,000			
		200 and more m <sup>2</sup>	1,200	1,500	1,800			
	Outdoor area from 6 m <sup>2</sup>	without any shape differentiation	700	800	900			
Construction of expositions through ABF			Registration fee			3,500		
YES / NO <input type="checkbox"/> YES <input type="checkbox"/> NO			Assurance of damage liability insurance			800		
BRANCH FOR LOCATION – specify the branch in words and state the branch code:								
PRICE - TOTAL								

All prices are given without VAT.

By signing the Binding Application form I grant my consent, in accordance with the Act no. 101/2000 Coll., with the processing of personal data for internal purposes of ABF, a.s., and furthermore I grant my consent in accordance with the Act no. 480/2004 Coll. with the sending of business announcements by electronic means. The consent can be withdrawn at any time by sending an e-mail message with text "do not send" to stoplist@abf.cz.

I hereby declare that I have made myself familiar with the Business Terms and Conditions of ABF, a.s. which form an integral part of the present Application and that I agree with their contents. I take cognisance of the fact that the matter concerns a framework agreement which is to be implemented by parts on the basis of purchase orders in written, e-mail or facsimile forms. In the case that the purchase orders are issued by a third person, the original copy is always required.

For ABF, a.s.

Date, signature for the Exhibitor/ Exhibitor's representative, stamp