



GOSSELIN MOVING

BELGIUM - MEMBER GOSSELIN GROUP



ORDER FOR SERVICE

I wish to accept your quotation datedfor the removal. I have read and accept your general conditions that were included with the quotation.

Dates for the removal

Name of shipper

Loading address/telephone number

.....
.....

Delivery address/telephone number

.....
.....

Contact address/telephone number at destination

.....
.....

Insurance requested for (amount)

The invoice will be settled by

.....
.....

VAT registration nr

.....
.....

If the charges will not be settled by the shipper:
name of responsible person in the company

Company stamp	Signature
	Date





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Vervoercommissienair *in aanvraag*
RPR *in aanvraag*
BTW *in aanvraag*