**APPLICATION FORM FOR DELEGATION VISIT TO FRUIT LOGISTICA 2020**

Please complete in English

1.

|  |  |  |
| --- | --- | --- |
| Company name: |  | |
| Contact person:  Mr.  Mrs.  Miss | First Name:       Surname:  Designation: | |
| **Office address** |  | Processing Unit/Packing House/Warehouse address |
| Address: |  | Street: |
| City/District: |  | City/District: |
| Mailing address | same as office address | Nearest airport/City: |
| Address: |  | Distance in km: |
| City/District: |  | Travelling time: |
| Phone: |  |  |
| Fax: |  | Farm Address (if applicable) |
| E-mail: |  | Street:  City/District: |
| Website: |  |
|  |  |  |

2. Type of business:  grower  processor  exporter  commercial exporter

other, please specify:

3. Legal status:  sole-proprietorship  partnership

private limited  co-operative

other, please specify:

4. Total no. of employees:       Established in year:

5. For Horticulture Exports: capacity/year: Export capacity in MT/year:

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| --- | --- | --- |
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|  |  |  |

Harmonized System (HS) Code nrs. of these products (if known):

6. What production, processing & packaging facilities for exports do you have? (if applicable)

Farm size: Hectares:      , Annual Production (Quantity):

Type of processing facilities:

Processing capacity:

Packaging facilities:

7. Is your company engaged in exports to any country?  no

yes: please complete the following, stating value in USD **per country/per year**

Product details: Year: Country: Value in USD:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

8. Is your company engaged in exports to Germany?  no

yes: please complete the following, stating value in USD **per country/per year**

Product details: Year: Country: Value in USD:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
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9. Is your company engaged in exports to EU?  no

yes: please complete the following, stating value in USD **per country/per year**

Product details: Year: Country: Value in USD:

|  |  |  |  |
| --- | --- | --- | --- |
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|  |  |  |  |

# 10. Do you possess the following certifications?

# GlobalGap HACCP BRC IFS

# Other (please specify)       Not required

# 11. In what role you desire to join the delegation?

# As Delegate As Co-exhibitor

12. Type of business relation you are looking for:

export  agency  joint venture technology  joint venture finance

other, please specify:

13. Any other information you would like to share about your company e.g. your company strengths:

14. Are you a member of any registered trade association? If yes, please specify:

15. Person submitting the above information:

Name:       Function:       Date:

### The following documents need to be provided along with your application form:

1. Two passport size photographs
2. Copy of Certifications
3. Membership of Association/Chamber
4. Bank Statements in support of exports reported in the application form