FORM 11

SECURITY DEPOSIT - MUST BE FILLED BY ALL EXHIBITORS WHO WORK

WITH A DIFFERENT TECHNICAL OPERATOR

Please fill and send to fig2018@fuardizayn.com by May 1, 2018.

TO BE FILLED OU	T BY BOOTH CONTRACTOR		
Exhibitor Company:			
Official Name of Con	tracter Company:		
Authorized accounta	ble signatory		
Name & Surname:			
Phone:		E-Mail:	
Booth No:		Booth Sqm:	
The security deposit	is calculated by multiplying the gross square	re meter area of the stand by \in 40.	
The security deposit	must be deposited to the account at the bo	ttom of this form until May 1, 2018.	
The deposit will be re	efunded within 5 business days after the en	d of the Exhibition (upon reaching agre	ement and after deduction of fines, if any).
Contractor's Acco	unt Details for Refunding of the Secu	rity Deposit	
ACCOUNT HOLDER			
BANK NAME			
BANK ADDRESS			
BRANCH NAME			
BRANCH CODE			
SWIFT CODE			
IBAN NO EURO			
	ty Deposit and Invoicing of Seized An	acusta	
-			PLIED with, deductions will be made from the secu
	mount of deduction will be invoiced.		FLIED with, deductions will be made from the sect
We undertake to pay	the fine to be determined by the organizer t	for each hour exceeding the schedule o	of build-up and breakdown.
acknowledge that a f	sing of a fine in the case that the approved s ine will be imposed and its amount will be o ure, Obscuring the visibility of other exhibito	letermined based on the degree of brea	otifying the Organizers. We ach, such as Closed walls, Exceeding the height
We acknowledge that	t, in the event that the Venue/Organizers wil y, and that all the respective costs will be b	l consider a stand as a potential hazard	I for visitors/exhibitors, a possible closure can be ertaken by the Organizers, such costs will be debite
We will indemnify the	e claims, damages, losses or expenses reg	arding injuries, damages to and loss of ed staff during the build-up/breakdown	property, which may arise from any breach of our of the stand and during the exhibition days.
Congress Center gro		is within the deadlines and in a way no	and for the removal of the wastes from Istanbul t hindering the build-up/breakdown operations, and
WARNING: The Or bank receipt for se		cess to Halls until this document	is received as signed and together with the
GRAND TOTAL:			
PAYMENT			
() I want to make	payment via bank transfer to the bel	ow account.	
ACCOUNT NAME	MCI FUARCILIK DIŞ TİC. LTD. ŞTİ.		
BANK NAME	YAPI KREDİ BANKASI		
BRANCH NAME	YILDIZ		
BRANCH CODE	1304		
TL IBAN:	TR46 0006 7010 0000 0053 0199 55	(SWIFT: YAPITRIS072)	
EUR IBAN:		(SWIFT: YAPITRISFEX)	
USD IBAN:	TR78 0006 7010 0000 0053 0095 82	(SWIFT: YAPITRISXXX)	
() I want to make total amount.)	payment via credit card and requesting	ng mail order form. (This option w	vill add %2,5 credit card commission to the
DATE	NAME - SURNAME		SEAL & SIGNATURE