

1. General request for German logistics services

*required information

I am interested in*

- Making use of a German logistics service provider (e.g. to distribute goods within Central Europe)
- Finding a partner for cooperation (e.g. to establish door-to-door transports)
- Knowledge-transfer (e.g. using consulting services of a German company with expertise in specific fields of logistics)

I am looking for German service providers capable to offer services in*

- Transport
by maritime shipping, road, rail, air, inland waterways, combined transport
for dangerous goods handling, cold chain (chilled, refrigerated), other: _____
- Warehousing
- Packing & Picking
- Transshipment
- Labelling
- Invoicing
- Custom Services
- Consulting / Expertise / Planning
Please specify
- Other: _____

Goods should be transported by those service providers (source, destination, weight, dimension)*

Type and quantity of goods:
i.e. Milk Powder; Full Container Load (FCL)

Source
From town, region, etc. to town, region, etc. via town, region, etc.

Commodity / sector*

- Automotive parts
- Medical products
- Clothing and footwear
- Other: _____
- Furnishings and household equipment
- Perishable goods
- Alcoholic beverages and tobacco

Frequency*

- Daily
- Weekly
- Monthly
- Other: _____

When should the service be put into operation?*

- Within a week
- Within a month
- Open
- Desired date: _____

Support Association Logistics Alliance Germany e. V. is an initiative of the German logistics industries. We help you finding competent logistics partner to capture new markets. All inquiries relating to Germany as a logistics location are treated confidentially. Please find our privacy policy on our website. Our service is free of charge.

2. General Information about you / your company

Salutation: Ms. Mr.

first name	last name*
job title	company name / legal entity*
telephone	email*
fax	website*
address / zipcode / city	state / province*

Kind of company*

- | | | |
|--|--|--|
| <input type="checkbox"/> Agent | <input type="checkbox"/> Importer | <input type="checkbox"/> Transport handling |
| <input type="checkbox"/> Association / institution | <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Wholesale / distributor |
| <input type="checkbox"/> Exporter | <input type="checkbox"/> Research organization | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Grower / producer | <input type="checkbox"/> Retailer | |

Company description (please include your products & services offered)*

Click here to type text

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