

Please fill out this form and send it to invisiblesolar@dyaqua.it

1 . APPLICANT

Fields marked with one asterisk (*) are mandatory for everyone, with two asterisks (**) are mandatory for UE subjects only.

QUOTATION REQUEST MADE AS *	ON BEHALF OF *	
<input type="text"/>	<input type="text"/>	
BUSINESS NAME / NAME SURNAME *		
<input type="text"/>		
REGISTERED OFFICE / ADDRESS *	CITY *	ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
COUNTRY *	VAT NUMBER / TAX CODE **	
<input type="text"/>	<input type="text"/>	

► Contact person

NAME SURNAME *	PHONE *	EMAIL *
<input type="text"/>	<input type="text"/>	<input type="text"/>

2 . SUPPLY

Fill out with information about your request. Fields marked with one asterisk (*) are mandatory.

AMOUNT *	UNIT OF MEASURE *	PRODUCT *
<input type="text"/>	<input type="text"/>	<input type="text"/>
TYPE OF INSTALLATION BUILDING/AREA		TIME LIMITATION FOR SUPPLY
<input type="text"/>		<input type="text"/>

► Dyaqua Delivery Service ⁽¹⁾

Fill out this fields only if you want a quotation with shipping costs included.

Dyaqua ship the goods on request and behalf of the Customer.

ZIP CODE	CITY	COUNTRY	RECIPIENT - TYPE OF SUBJECT
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SHIPPING INSURANCE			
<input type="text"/>			

► Additional information

Write in this area any other information that you think it could be useful in compilation of our offer (max 300 characters).

3 . SAMPLES PURCHASE

Fill out these fields if you want to ask for a quotation to purchase Invisible Solar samples. Samples are working modules that are directly picked up from supplies production line. Shipment of the first sample is free of charges for deliveries in Italy.

QUANTITY	PRODUCT	DELIVERY PREFERENCES

► Dyaqua Delivery Service ⁽¹⁾

Fill out these fields only if "Dyaqua Delivery Service" has been selected in "Delivery preferences" area.

RECIPIENT (BUSINESS NAME / NAME SURNAME)	NAME AND SURNAME OF SHIPPING REFERENCE	RECIPIENT - TYPE OF SUBJECT
ADDRESS	ZIP CODE	CITY
COUNTRY	PHONE NUMBER	EMAIL

4 . PRIVACY

- I confirm I have read the current Privacy Policy that is available on the website www.dyaqua.it
- I give my consent to process my personal data for the purpose of the current request, in accordance with the Privacy Policy.

FORM COMPILATION DATE: