

## Check-in form for assemblers/craftsmen/technicians with pre-registration

		Please fill in on PC or in PRINTED CAPITALS. If applicable, all information not marked "optional" is mandatory. Only complete and legible applications can be processed. The applicant is solely responsible for the accuracy of the data.										
Access	CHEMPARK Site	DOR	LEV			pecification	Installation		Trou	uble- oting	Other	
	Details of th	e destinatio	on at CHE	MPARK								
	CHEMPARK partner						Destination building r	-				
	Access required on or from/until (3 days max.)						Entry via gate					
	Last name, first name (person responsible for order)											
	Telephone (person responsible for order)						Signature of person responsible for order					
	Job is carried out by											
	Company	<b>y</b>			Address							
	Last name craftsmen					First name craftsmen						
	Date of birth	te of birth		Place of bir	Place of birth		Natio	onality				
Entry	Entry and ex	kit with the	following	vehicle								
	Entry with own vehicle required?  Yes No Official license plate number											
	Reasons Required to take along heavy bulky extensive range of tools											
	Materials/sp	are parts b	rought a	long								
	Specification								Quantity			
	Additional cargo not destined for CHEMPARK? Yes No											
	Specification of additional cargo							Quantity				
Bringing	Special permission											
	Carrying IT Yes No Serial number IT											
	Carrying tools? Yes No If yes, please fill out tool registration form for tools.											
	I confirm that the above information is correct. I have taken full note of and understood the safety and regulatory regulations at CHEMPARK, the safety instructions and CHEMPARK traffic regulations.											
		Date			Signature craftsman							

