

PROJECT PROTECTION FORM

DEALER COMPANY NAME	
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BRANCH			TEL		MAIL	
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REFERENT	
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INDICATIVE NET VALUE OF THE ORDER :	
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The undersigned _____ declares to request the activation of project protection on a work of his own design. It therefore relieves the GRUPPO RAINA - Ideallux Srl any possible objection by other market operators and undertakes, if required, to present proof of design partnership

AGENCY	
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PROJECT NAME	
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DESCRIPTION	
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DESTINATION OF GOODS	
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PLANT CONSTRUCTION EXPECTED DATE	
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CUSTOMER			
MR/MRS			
ADDRESS			
TEL		MAIL	

ARCH COMPANY			
ARCHITECT			
ADDRESS			
TEL		MAIL	

PLANT INSTALLER			
MR/MRS			
ADDRESS			
TEL		MAIL	

PRODUCT LIST

PRODUCT CODE	CUSTOM CODE	DESCRIPTION	QTY	GROSS PRICE €

<p>CODE ASSIGNED TO THE PROJECT OR TO THE DESIGNER, TO BE INSERTED BY THE APPLICANT, WITHIN OUR STANDARD CODES DURING THE OFFER PHASE. The same code must also be indicated when ordering.</p>	
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DATE OF REQUEST		APPROVAL DATA	
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EXTRA DISCOUNT GRANTED	
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APPLICANT STAMP AND SIGNATURE	STAMP AND SIGNATURE OF GRUPPO RAINA FOR APPROVAL
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