

Intake Form

Instructions for use:

- Through this intake form you will enter the intake procedure which is meant for companies who are interested in doing business in foreign countries.
- This is for serious companies who are looking for opportunities to do international business. For example for a joint project (investment), to export to the Netherlands / EU / Non-EU, to import from the Netherlands or for a transfer of expertise/knowledge/experience from a foreign business partner.
- We will only take into consideration forms of which all fields have been completed.
- Please fill in the intake form in English.
- Please send your complete intake form before ... to:..... If we receive your intake form after the abovementioned date we can not guarantee your application will be taken into consideration.
- If you have any queries about the procedure please contact us at: telephone number: or via e-mail:

This form is provided by and must be submitted to:

NL Agency
P.O Box 20105
2500 EC The Hague
P: +31-88-6028399

evenementen@info.agentschapnl.nl

Company name:	
Contact person:	
Position contact person:	
Visiting address:	
Telephone number:	
E-mail address:	
Postal code and city:	
Company website:	
Established In:	

Please describe your company

	20..	20..
Turn over In Euro's (average)		
Nett profit in Euro's (average)		
Number of permanent staff		
Number of temporary staff (If any)		
<i>Please enclose audited annual reports and accounts</i>		

4. Requested type of information

- ☐ Joint project in your country (investment)
☐ Export to The Netherlands EU / Non EU
☐ Import from The Netherlands
☐ Transfer of expertise/ knowledge/ experience
☐ Other

Please explain in more detail the requested type of information of your choice mentioned above

Describe in detail the required profile of your future foreign business partner

Describe in detail the unique selling points of your products or service that differentiate it from similar products or services

I hereby certify that I have completed this form truthfully:

Name:

Place:

Date: