**LETTER OF INTENT - GOWNS**

We the undersigned hereby confirm that we are ready to purchase gowns in a quantity and for the price as specified below:

|  |  |
| --- | --- |
| Product specification (edit according to requirements) | Disposable medical Isolation gown  Disposable Surgery gown  Sterile  Non-sterile  Blue  White  Yellow  Other Colour  PP (Polypropylène) non-woven  PP & PE (plasticised, hydrophobic)  30gr/m2  40gr/m2  Unique size: \_\_\_ cm x \_\_\_ cm  Knit cuff  Neck closure  Tie at the back  Level \_\_ (1, 2, 3, or 4)  Full back  FDA  CE  EN  ISO  Other  Size and Quantity:  S \_\_\_\_\_\_\_\_\_\_\_\_\_  M \_\_\_\_\_\_\_\_\_\_\_\_\_  L \_\_\_\_\_\_\_\_\_\_\_\_\_  XL \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Shipping Terms for sale | One off  Multiple deliveries |
| Preferred Origin |  |
| Total/Contract Quantity  Regular Weekly / Monthly Quantity | Packs: Gowns: |
| Packing and Sizing | 10 per pack  10 Packs per Carton |
| Price Target | Per pack of 100 :  Per gown: |
| Payment | Bank Transfers 50% on order 50% prior to Loading for Transport of each batch  Bank Transfers 100% prior to Loading for Transport of each batch (Requires Security and Funding Costs added to the Price)  Bank Transfers 100% on delivery to destination Country (Requires Security and Funding Costs added to the Price) |
| Security for Payment Options | Bank Guarantee  Letter of Credit  Escrow of Funds  Other |
| Preferred Delivery Timing and Terms | Ex Works  FOB  CIF  Transport to Destination |
| Preferred Mode of Delivery | Air  Fast Sea  Normal Sea |
| Destination Airport or Shipping Port |  |
| Inspection Arrangements (SGS/BV etc) | Customer inspects at Country of Manufacture Prior to Loading  Customer inspects at delivery in Country of Destination  SGS Report at Country of Manufacture Prior to Loading  SGS Report at delivery in Country of Destination  Other |

|  |  |
| --- | --- |
| **Buyer’s information** | |
| Name |  |
| Position |  |
| Company Name |  |
| Description of Company Business |  |
| Registration Number |  |
| Address |  |
| City/Zip |  |
| Country |  |
| Business Telephone |  |
| Mobile Telephone |  |
| Email |  |
| Website Address |  |
| Other |  |

|  |  |
| --- | --- |
| **Buyer’s Bank information** | |
| Bank Name |  |
| Bank address, city, country |  |
| Bank website address |  |

This letter of intent is the only current active and valid LOI and has been offered to the Seller.

**Buyer:**

**Signature:**

**Name of Party Signing:**

**Title of Party Signing:**

**Date: / /**