**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 [ ] OtherSize and Quantity:[ ] S \_\_\_\_\_\_\_\_\_\_\_\_\_[ ] M \_\_\_\_\_\_\_\_\_\_\_\_\_[ ] L \_\_\_\_\_\_\_\_\_\_\_\_\_[ ] XL \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Shipping Terms for sale | [ ] One off [ ] Multiple deliveries |
| Preferred Origin  |  |
| Total/Contract QuantityRegular Weekly / Monthly Quantity | Packs: Gowns: |
| Packing and Sizing | 10 per pack10 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 |

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| --- |
| **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: / /**