



Ilmas S.p.A.  
Via Giovanni Falcone 7  
20024 Garbagnate Milanese (MI)  
tel: +39 02 9390 0349-353  
fax: +39 02 9390 0357  
e-mail: ilmas@ilmas.com

## PROJECT PROTECTION FORM

FORM 017

(\*) Retailer's company name:

(\*) Branch office:  Tel:

(\*) Project contact person:

### NB: PROTECTION VALID FOR ORDER VALUE OF 5.000,00 EURO OR MORE

(\*) The undersigned  hereby declares that he /she is requesting the activation of the project protection on a work of his/her own design. Therefore he/she releases **Ilmas S.p.A.** from any possible objection by other market operators and undertakes, if requested, to submit proof of authorship of the design.

The data below are from ILMAS S.p.A. design.

YES ☐

NO ☐

(\*) Agency:

(\*) PROJECT DETAILS:

Description:

Goods delivery destination:  City:

Estimated date of project delivery:

#### (\*) CUSTOMER:

Contact person:

Address:

ZIP & City:

Phone:

E-mail:

#### ARCHITECT:

Contact person:

Address:

ZIP & City:

Phone:

E-mail:

#### LIGHTING DESIGNER:

Contact person:

Address:

ZIP & City:

Phone:

E-mail:

#### INSTALLER:

Contact person:

Address:

ZIP & City:

Phone:

E-mail:

