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head quarter

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FORM PROTECTION PROJECT - FPP-

ATTENTION: the activation of the Protection Project is granted only for net amounts EQUAL to HIGHER then 3.000,00 euros.

Reserved to Oty Srl
P.I.N. FPP _____
FPP expiry date ____/____/____

Tables to be filled in by Oty customer:

I..... claim to be Oty customer and require the activation of the protection project on my design work project. Referring to this project, I discharge Oty srl from every dispute coming from other operators on the market. If required by Oty srl, I'll give proof of the paternity of my work design project.

Project details _____
Description _____
Goods destination _____ Country/City _____
Realisation date project ____/____/____

Buyer _____ Person of ref. _____ Address _____ Country/City _____ Phone/Mobile _____ Fax _____ E-mail _____	Architect _____ Person of ref. _____ Address _____ Country/City _____ Phone/Mobile _____ Fax _____ E-mail _____
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Light Designer _____ Person of ref. _____ Address _____ Country/City _____ Phone/Mobile _____ Fax _____ E-mail _____	Technical _____ Person of ref. _____ Address _____ Country/City _____ Phone/Mobile _____ Fax _____ E-mail _____
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