

Annex no. 7 to network statement

SUPPORT SERVICE ORDER FORM

OPERATIONAL COORDINATION SERVICE ORDER

for transport to/from Sławków Euroterminal station no.: _____

(carrier's no./month/year/VKM)

1. **Details of the carrier (X) ordering the service:**

Name: _____

Address: _____

NIP: _____

E-mail address: _____

Telephone no.: _____

2. **Train / route data:**

Train no.: _____

Number of wagons: _____

Gross weight of the train including locomotive:

Route: _____

Date of realization: _____

2A. **Scope of the ordered service:**

Organization of traction service

3. **Operational notes:**

Time and place of delivery:

Time and place of receipt of the set:

4. Carrier's declarations:

I declare that:

- I have allocated capacity,
- I have read the network regulations,
- I hereby commission the implementation of operational coordination services in accordance with its provisions.

6. Date of order placement:

7. Carrier's signature:

TO BE COMPLETED BY THE INFRASTRUCTURE ADMINISTRATOR

8. Date of order acceptance:

9. Entity designated to carry out operational activities (e.g. carrier Y):

10. Date of transfer for execution:

11. Comments:

12. Signature of infrastructure manager:
