**Inward Trade Mission PROGRAMME**

**PORTUGAL**

**Sectors: Hotel Textiles, Design, Décor, Home Textiles, Soft Furnishings**

**BUYER IDENTIFICATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Name** |  | **Job title** |  |
| **Company name** |  | | |
| **Web** |  | | |
| **Contact tel no.** |  | | |
| **Contact email** |  | | |
|  | | | |
| What is the main activity of your company? | | | |
|  | | | |
| Type of activity (Wholesaler / Retail Chain / Importer/ Distributor / other… please specify): | | | |
|  | | | |
| Company Turnover for last year? | | | |
|  | | | |
| Company size (number of employees): | | | |
|  | | | |
| What kind of products are you looking for? | | | |
|  | | | |
| Any remarks about the products? | | | |
|  | | | |
| Are you already buying from Portugal? | | | |
| Yes ……. No ……. | | | |
| Indicate the name of your existing Portuguese suppliers: | | | |
|  | | | |