



الغرفة العربية اليونانية للتجارة والتنمية
ΑΡΑΒΟ-ΕΛΛΗΝΙΚΟ ΕΠΙΜΕΛΗΤΗΡΙΟ ΕΜΠΟΡΙΟΥ & ΑΝΑΠΤΥΞΕΩΣ
ARAB-HELLENIC CHAMBER OF COMMERCE & DEVELOPMENT

**Expression of Interest for Transfer of Technology & Knowhow
(Technical, Operational, Managerial) to the Arab World**

(please fill in the form in English, sentence-case, and send it to chamber@arabgreekchamber.gr.)

COMPANY NAME

Head of the Company: _____

Business Sector: _____

Year of Company Establishment: _____

CONTACT INFO

Full Name: _____

Position: _____

Tel.: _____ Mob: _____ Fax.: _____

E-mail: _____ Web site: _____

Address: _____

Member of the Arab-Hellenic Chamber

Non-Member of the Arab-Hellenic Chamber

NATURE OF BUSINESS - TYPE OF PRODUCT/S

Tel.: +30-210-6711210, +30-210-6726882, +30-210-6773428 • Fax.: +30-210-6746577

E-mail: chamber@arabgreekchamber.gr • www.arabhellenicchamber.gr

Excellence in Partnership



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ADDITIONAL USEFUL INFORMATION

This information is useful for us in order to provide better assistance in establishing a fruitful cooperation with companies in the Arab World.

- Has your company ever exported to the Arab countries? If yes, please specify.

- Do you have a permanent agent/representative in any of the Arab countries? Please specify.

- Please mark your interest:

1. turn-key project/product
2. expansion of business
3. joint venture

Please elaborate on any other information, business or technical aspects that might appeal to the Arab businessmen to consider engaging in negotiations with your company for this transfer of know-how.

Name:

Position:

Date:

Signature & Company Stamp:

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