



MARKET OPPORTUNITY FORM



CONFIRMATION FORM

Please type to fill in this form

Basic Information				
Company Name				
Company Address, email and tel. No.				
Business Profile	Year of establishment:	Type of business:	No. of employment:	Turnover in Tshs.:
Name of Attended Persona & Position				
Product information				
Sector:				
Production capacity per month:				
Products Company Export :	Capacity to Export per month/year			
1.				
2.				
3.				
Any challenge encountered in the export trade				
Please confirm by signing or typing down your name and date below:				
Name:				
Date:	Signature/:			
	Company seal			
Are you agreeing the Swedish delegate visit to your production site? Please tick where appropriate.				
Yes No.....				
If the answer is yes please provide site location and address				
Your Expectations from this Seminar				
Briefly explain your expectations from the Seminar				
ANY OTHER COMMENT:				
<p>CONTACT Director General Tanzania Trade Development Authority (TanTrade) <i>Foresting Business</i> P.O.Box 5402 Mwl. J. K. Nyerere, Kilwa Road Tel: +255 22 285 0238, Email: info@tantrade.go.tz</p>				