

Labor Information			Discount Price	Standard Price	
Straight Time	Monday - Friday	8:00 am - 4:30 pm	\$92.00	\$125.00	
Over Time	Monday - Friday Saturday & Sunday	4:30 pm - 8:00 am All Day	\$138.00	\$187.50	
Double Time	Holidays	All Day	\$184.00	\$250.00	

Expo Supervisory Fee is 30% of total cost or \$60.00, whichever is greater.

Please note

- Hours are based on estimates, you will be invoiced for actual time incurred.
- Requested times are not guaranteed and are based on availability.
- Minimum one hour will be charged. Additional time will be billed in half-hour increments.
- If Labor order is cancelled within 24 hours of scheduled services, total charges will be assessed.

ls Lab	or for assembling	g sign for hanging	? Yes 🗌	No 🗌		
Is Labor for laying your own carpet? Yes No No						
INSTALLAT	ION					
Your Supervisor's Name: Cell Number:			Expo Supervision? Yes No No			
Date	Start Time	Number of Men	Hours per Man	Rate	Expo Supervision Cost	Estimated Cost
DISMANTLE						
Your Supervisor's Name: Cell Number:			Expo Supervis	No 🗌		
Date	Start Time	Number of Men	Hours per Man	Rate	Expo Supervision Cost	Estimated Cost
Please co	mplete this se	ction if you ha	ve chosen EX	PO to supervis	se your installation ar	nd/or dismantling.
Set-up Information for Installation: Please check all that apply and provide information where requested. Booth size: X Forklift required: Yes No Carpet is? Owned Rented from EXPO Carpet padding? Yes No Drawings? Faxed to EXPO Shipped w/exhibit crates			Inbound Freight Information Carrier Company Name: Weight of Shipment: Is Shipment?			
Electrical Information: Electrical should go under the carpet (diagram is attached) Electrical drawings are attached Electrical drawings are with exhibit in crate number Electrical drawings were sent to the official contractor Services You Have Ordered (please check all that apply): Electrical Electrical Furniture Booth Cleaning A/V Equipment			Outbound Freight Information Carrier Company Name: Delivery Shipment To: Address: City, State, Zip: Type of Service (air, van line, ground, etc.): If for any reason your shipment is not picked up by your carrier, please choose one of the following options: (Initial beside preferred option) Force freight through EXPO's preferred carrier: Send shipment back to EXPO warehouse:(\$50.00 min. fee)			
Company Name	:				Booth #:	

Please return via fax along with payment policy form 305.751.1298 or email to info@expocci.com



INSTRUCTIONS		EQUIPMENT AND LABOR RATES TO HANG SIGNS			
All hanging signs must conform to Show M regulations and facility limitations.	lanagement rules and	STRAIGHT TIME - 8:00AM to 4:30PM, Monday through Friday OVERTIME - 4:30PM to 8:AM, Monday through Friday			
All overhead hanging signs or banners must be handled by Expo Convention Contractors, Inc. Overhead hanging signs must be sent in separate containers directly to Expo Convention Contractors, Inc. warehouse using the enclosed HANGING SIGN LABELS		ALL DAY Saturday and Sunday CREW SIZE - MINIMUM of two people, Operator and one rigger			
Hanging anchor points must be pre-fabricated		MATERIALS - Cable, clamp, etc. additional and charged accordingly			
Electrical signs must be in working order and National Electrical Code. ELECTRICAL SI	ERVICE requirements	EQUIPMENT WITH CREW: *Rates Are Per Lift Crew/Per Hour *One Hour Minimum Per Lift Crew			
must be ordered in advance on the enclosed ELECTRICA SERVICE order form. For Signs other than banners, include blueprint or drawing containing the service of the service		Straight Time Overtime Boom Lift with Crew: (Condor/ Discount Price \$531.00 \$749.50			
SIGN DESCRIPTION, SIZE &	WEIGHT	Snorkel) up to 200 lb. lift capacity. Standard Price \$690.30 \$974.35 Additional crew/Assembly labor: Discount Price \$92.00 \$138.00			
detailed information so hanging anchor points	can be determined.	Standard Price \$125.00 \$187.50			
Type: Cloth Banner Metal or Wood Shape: Square Triangle Rectang Size: Height William W	le Other dth	Approx. Hours Hourly Rate Total Estimated Cost @ =			
Weigh of sign: Does your Sign Require Electricity		DISMANTLE DATE: Approx. Hours Hourly Rate Total Estimated Cost			
Use diagram below to represent your booth s in from	pace. Indicate how far	=			
PLACEMENT DIAGRA	ιM	SUPERVISION for installation and dismantling of overhead hanging signs can be provided by EXPO CONVENTION CONTRACTORS, INC., your company representative or display house.			
each boundary you would like your sign placed. The ceiling structure and relation to the support beam may require		Please indicate method of supervision you require:			
your sign to be moved from your specified loc Feet in From the Back Aisle #	ation.	EXPO I&D Exhibitor Personnel Display Hous *Additional crew and/or equipment will be used if the supervisor deems it necessary to safely complete the installation and/or dismantling of a job and will be charged accordingly.			
Feet in From the Left Aisle #	Feet in From the Right Aisle #	NOTE: WE ARE NOT RESPONSIBLE FOR, LIABLE FOR, AND WILL NOT HANG ANY SIGNAGE CONSTRUCTED IN ANY MANNER DEEMED UNSAFE.			
Feet in From	7 uoto 11	Subtotal \$ 7% Sales Tax \$			
the Front Aisle #		Payment enclosed \$			
Number of feet from bottom of sign:		·			
accepted. No credits will be issued a IMPORTANT: TO OBTAIN DISCOUNT PRICE, FU No Telephone orders accepted.	fter the closing of the show. LL PAYMENT MUST BE INCLUE	f the Show. For your convenience, MasterCard, American Express and Visa credit cards will b DED WITH YOUR ORDER. (1) hour cancellation or no-show fee per crew and/or worker.			
PLEASE PRINT					
Exhibitor Name:		Booth #:			
Contact Name:		Email:			
Address:					
City:	State:	Zip:			
Authorized:		Print Namo:			

Please return via fax along with payment policy form to 305.571.1298 or emails flo@expocci.com

NO SERVICES WILL BE RENDERED UNTIL THIS DOCUMENT IS COMPLETED, SIGNED AND RETURNED TO EXPO

ADVANCE AND/OR FLOOR ORDERS:

All Orders require ADVANCE PAYMENT for initial estimate of charges for services AND a VALID CREDIT CARD with proper authorization be provided to EXPO. You may prepay with a check written on your company, but a credit card is required by EXPO to ensure any unexpected charges, such as additional freight, clean-up costs, etc., are paid at the time the Show closes.

THIRD PARTY ORDERS:

If you choose to contract work to a Display or Exhibit house/company and/or require services from EXPO, the Payment Policy presented above shall apply. EXPO must be notified, in writing, from exhibiting company of any other display or exhibit company involved in the set up or breakdown of exhibits. The exhibiting firm is ultimately responsible for payment of all costs incurred on its behalf. If a third party is to be invoiced for certain items or services, please complete and submit Expo's Third Party Payment Policy prior to placing order.

DRAYAGE TO WAREHOUSE OR SHOW SITE AND/OR LABOR:

EXPO's Payment Policy must be adhered to by Exhibitor prior to any freight being shipped to EXPO. All charges for freight, assembling, disassembling, shipping, handling and any other must be prepaid. If adjustments or additional charges are required at Show Close, they will be charged to the enclosed Credit Card provided, unless Exhibitor disputes charges in writing. EXPO is not responsible for any damage or loss of your freight, please secure round trip insurance from your company insurance carrier.

ALL CHARGES:

All charges/costs requested by Exhibitor MUST be PAID IN FULL before services are rendered, and any adjustment and/or additional charges must be paid by Show Close. Such costs will be charged to Exhibitor's credit card provided unless prior arrangements have been made. All checks must be drawn on a U.S. bank, and there will be a minimum charge of \$39 for each NSF check written to EXPO.

ADJUSTMENTS:

Exhibitors are responsible for ensuring services are rendered as ordered prior to the Show opening. All requests for adjustments must be made on site prior to the Show's closing. EXPO will not be responsible for adjustments after the Show closes unless prior arrangements have been agreed to in writing by EXPO.

SALES TAX:

Applicable city, county and state sales tax will apply. If any Exhibitor is exempt from paying sales tax, it is the Exhibitor's responsibility to provide EXPO with its tax exempt number prior to beginning of show.

CANCELLATION POLICY:

In the event of a natural disaster, acts of God or terrorists, which result in the cancellation of this event, EXPO will be entitled to a fee equal to the percentage of work completed by EXPO. This percentage will be determined solely by EXPO. In the event the deposit received exceeds the percentage of work completed, EXPO will refund the excess deposit.

COLLECTION POLICY:

In the event this contract is turned over to an attorney for collection or dispute, EXPO will be entitled to reasonable attorney fees.

Return via fax 305-751-1298 or email info@expocci.com
We accept American Express, Visa, MasterCard and Discover for your convenience.
No checks will be accepted at show site.

Exhibitor:		Contact Name:		Воо	th:	
Address:						
City:	State:		Zip:	Country:		
Phone:			Email:			
Credit Card Used For Payment: No.:				Expires:		
Security Code: (Th			e 3 numbers on back of card or for Amex the 4 numbers on the front)			
Billing Address for credit card:						
City:			State:	Zip Code:		
Credit Card Holder (Print Name as it appears on card):						
Card Holder Signature:						

******Cardholder hereby authorizes EXPO to charge credit card described herein for all charges incurred by Exhibitor and has read, understands, and agrees to all forms in the exhibitor manual and agrees to pay all charges as described in Cardholder Agreement. All estimated charges must be paid in ADVANCE, AND a valid credit card must be on file with EXPO authorizing payment for modified and/or additional charges. All Charges must be paid by end of Show.

THIS FORM IS TO BE FILLED OUT ONLY IF YOU HAVE HIRED A THIRD PARTY TO SET UP YOUR BOOTH.

THIRD PARTY PAYMENT CONDITIONS:

This form must be completed and signed by BOTH PARTIES and returned to EXPO prior to placing any orders. If there is any doubt which party is to be invoiced for a service, the exhibiting firm accepts responsibility for payment. The exhibiting firm is ultimately responsible for payment of all charges by show conclusion. If charges have been billed to the wrong party and EXPO was not provided with the completed Third Party Payment Policy prior to the order being placed, any refund must be settled between the exhibiting firm and third party.						
PLEASE INDICATE WHICH ITEMS/SERVICES ARE TO BE INVOICED TO THE THIRD PARTY:						
All Expo Services	Booth Cleaning	Booth	Labor			
Freight Handling	Freight Handling Furniture/Carpet Other (Specify):					
We understand and agree that we, the exhibiting firm, are ultimately responsible for payment of charges incurred. In the event the third party named below does not make payment, such charges will be presented to the exhibiting firm, and exhibiting firm will make payment to Expo prior to the close of the show. (Signature required below.)						
Authorized Firm Representative	Signature:					
We acc	ept American Express, Visa, MasterC	ard an	d Discover Card for your co	onvenience.		
	EXHIBITING	CO	MPANY			
Exhibiting Company:				Booth #:		
Address:						
City:	State:	Cou	intry:	Zip Code:		
Email:	Email:			Contact/s:		
Credit Card Used For Paymen	t: No.:			Expires:		
Security Code:	(Th	e 3 nı	umbers on back of card or	for Amex the 4 numbers on the front)		
Billing Address for credit card:						
City:	State:	Cou	intry:	Zip Code:		
Credit Card Holder (Print Name): Signature:						
****Cardholder hereby authorizes EXPO to charge credit card described herein for all charges incurred by Exhibitor and has read, understands, and agrees to all forms in the exhibitor manual and agrees to pay all charges as described in Cardholder Agreement. All estimated charges must be paid in ADVANCE, AND a valid credit card must be on file with EXPO authorizing payment for modified and/or additional charges. All Charges must be paid by end of Show.						
THIRD PARTY						
Third Party Company Name:				Booth #:		
Address:						
City:	State:	Cou	intry:	Zip Code:		
Email:			Contact/s:			
Credit Card Used For Payment	:: No.:		Expires:			
Security Code: (The 3 numbers on back of card or for Amex the 4 numbers on the front)						
Billing Address for credit card:						
City:	State:	Cou	ntry:	Zip Code:		
Credit Card Holder (Print Name):			Signature:			

****Cardholder hereby authorizes EXPO to charge credit card described herein for all charges incurred by Exhibitor and has read, understands, and agrees to all forms in the exhibitor manual and agrees to pay all charges as described in Cardholder Agreement. All estimated charges must be paid in ADVANCE, AND a valid credit card must be on file with EXPO authorizing payment for modified and/or additional charges. All Charges must be paid by end of Show.