

Labor Information			Discount Price	Show Site Price
Straight Time	Monday - Friday	8:00 am - 4:30 pm	\$89.60	\$121.00
Over Time	Monday - Friday Saturday & Sunday	4:30 pm - 8:00 am All Day	\$134.40	\$181.50
Double Time	Holidays	All Day	\$179.20	\$242.00

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.

Is Labor for assembling sign for hanging?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is Labor for laying your own carpet?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

INSTALLATION						
Your Supervisor's Name: Cell Number:				Expo Supervision? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Date	Start Time	Number of Men	Hours per Man	Rate	Expo Supervision Cost	Estimated Cost

DISMANTLE						
Your Supervisor's Name: Cell Number:				Expo Supervision? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Date	Start Time	Number of Men	Hours per Man	Rate	Expo Supervision Cost	Estimated Cost

Please complete this section if you have chosen EXPO to supervise your installation and/or dismantling.

Set-up Information for Installation:	
Please check all that apply and provide information where requested.	
Booth size:	_____ X _____
Forklift required:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Carpet is?	<input type="checkbox"/> Owned <input type="checkbox"/> Rented from EXPO
Carpet padding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Drawings?	<input type="checkbox"/> Faxed to EXPO <input type="checkbox"/> Shipped w/exhibit crates


Inbound Freight Information	
Carrier Company Name: _____	
# of pieces: _____	Weight of Shipment: _____
Is Shipment? <input type="checkbox"/> Crated <input type="checkbox"/> Uncrated	
Tracking/Pro#: _____	
Estimated arrival date: _____	
Shipment to arrive at: <input type="checkbox"/> Warehouse <input type="checkbox"/> Show Site	

Electrical Information:	
<input type="checkbox"/>	Electrical should go under the carpet (diagram is attached)
<input type="checkbox"/>	Electrical drawings are attached
<input type="checkbox"/>	Electrical drawings are with exhibit in crate number
<input type="checkbox"/>	Electrical drawings were sent to the official contractor
Services You Have Ordered (please check all that apply):	
<input type="checkbox"/>	Electrical
<input type="checkbox"/>	Furniture
<input type="checkbox"/>	Booth Cleaning
<input type="checkbox"/>	Telephone/Internet
<input type="checkbox"/>	A/V Equipment

Outbound Freight Information	
Carrier Company Name: _____	
Delivery Shipment To: _____	
Address: _____	
City, State, Zip: _____	
Type of Service (air, van line, ground, etc.): _____	
<i>If for any reason your shipment is not picked up by your carrier, please choose one of the following options: (Initial beside preferred option)</i>	
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 to 305.571.1298 or email to info@expocci.com

INSTRUCTIONS	EQUIPMENT AND LABOR RATES TO HANG SIGNS																														
<p>All hanging signs must conform to Show Management rules and regulations and facility limitations.</p> <p>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</p> <p>Hanging anchor points must be pre-fabricated and ready for use.</p> <p>Electrical signs must be in working order and in accordance with the National Electrical Code. ELECTRICAL SERVICE requirements must be ordered in advance on the enclosed ELECTRICAL SERVICE order form. For Signs other than banners, include blueprint or drawing containing</p>	<p>STRAIGHT TIME - 8:00AM to 4:30PM, Monday through Friday OVERTIME - 4:30PM to 8:AM, Monday through Friday ALL DAY Saturday and Sunday</p> <p>CREW SIZE - MINIMUM of two people, Operator and one rigger</p> <p>MATERIALS - Cable, clamp, etc. additional and charged accordingly</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">EQUIPMENT WITH CREW</th> <th style="width: 20%;">STRAIGHT TIME</th> <th style="width: 20%;">OVERTIME</th> </tr> </thead> <tbody> <tr> <td>*Rates Are Per Lift Crew/Per Hour</td> <td></td> <td></td> </tr> <tr> <td>*One Hour Minimum Per Lift Crew</td> <td></td> <td></td> </tr> <tr> <td>Boom Lift with Crew..... (Condor/Snorkel) up to 200 lb. lift capacity</td> <td style="text-align: right;">\$515.50</td> <td style="text-align: right;">\$727.70</td> </tr> <tr> <td>Additional crew/Assembly labor.....</td> <td style="text-align: right;">\$96.55</td> <td style="text-align: right;">\$157.00</td> </tr> </tbody> </table> <p>INSTALLATION ESTIMATE</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Approx. Hours</th> <th style="width: 30%;">Hourly Rate</th> <th style="width: 40%;">Total Estimated Cost</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>@ _____</td> <td>= _____</td> </tr> </tbody> </table> <p>Dismantle Date: _____</p> <p>SUPERVISION for installation and dismantling of overhead hanging signs can be provided by EXPO CONVENTION CONTRACTORS, INC., your company representative or display house.</p> <p>Please indicate method of supervision you require:</p> <p>_____ EXPO I&D _____ Exhibitor Personnel _____ Display House</p> <p><small>*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.</small></p> <p>NOTE: WE ARE NOT RESPONSIBLE FOR, LIABLE FOR, AND WILL NOT HANG ANY SIGNAGE CONSTRUCTED IN ANY MANNER DEEMED UNSAFE.</p> <table style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 60%;">Subtotal</td> <td style="width: 5%;">\$</td> <td style="width: 35%;"></td> </tr> <tr> <td>7% Sales Tax</td> <td>\$</td> <td></td> </tr> <tr> <td>Payment enclosed</td> <td>\$</td> <td></td> </tr> </tbody> </table>	EQUIPMENT WITH CREW	STRAIGHT TIME	OVERTIME	*Rates Are Per Lift Crew/Per Hour			*One Hour Minimum Per Lift Crew			Boom Lift with Crew..... (Condor/Snorkel) up to 200 lb. lift capacity	\$515.50	\$727.70	Additional crew/Assembly labor.....	\$96.55	\$157.00	Approx. Hours	Hourly Rate	Total Estimated Cost	_____	@ _____	= _____	Subtotal	\$		7% Sales Tax	\$		Payment enclosed	\$	
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<p>detailed information so hanging anchor points can be determined.</p> <p>Type: Cloth Banner _____ Metal or Wood _____ Other _____ Shape: Square _____ Triangle _____ Rectangle _____ Other _____ Size: Height _____ Length _____ Width _____ Weigh of sign: _____ Does your Sign Require Electricity _____ Assembly _____</p> <p>Use diagram below to represent your booth space. Indicate how far in from</p>																															
PLACEMENT DIAGRAM																															
<p>each boundary you would like your sign placed. The ceiling structure and relation to the support beam may require your sign to be moved from your specified location.</p> <div style="text-align: center;"> <p>_____ Feet in From the Back Aisle # _____</p>  <p>_____ Feet in From the Front Aisle # _____</p> </div> <p>Number of feet from bottom of sign: _____</p>																															

PAYMENT POLICY: All invoices must be settled at our Service desk prior to the closing of the Show. For your convenience, MasterCard, American Express and Visa credit cards will be accepted. No credits will be issued after the closing of the show.

IMPORTANT: TO OBTAIN DISCOUNT PRICE, FULL PAYMENT MUST BE INCLUDED WITH YOUR ORDER.
No Telephone orders accepted.
Labor must be cancelled in writing, 24 hours in advance to avoid one (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 Name:

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

DISCOUNT DEADLINE:

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 DiscoverCard for your convenience.

No checks will be accepted at show site.

Exhibitor:		Contact Name:		Booth:	
Address:					
City:		State:		Country:	
Phone:			Email:		
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:		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.

DISCOUNT DEADLINE:

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
 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 accept American Express, Visa, MasterCard and Discover Card for your convenience.

EXHIBITING COMPANY

Exhibiting Company:			Booth #:		
Address:					
City:	State:	Country:	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:	Country:	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:	Country:	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:	Country:	Zip Code:		
Credit Card Holder (Print Name):			Signature:		

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