



NON-OFFICIAL  
CONTRACTOR

DISCOUNT DEADLINE:  
FEBRUARY 11, 2014



For Exhibitors intending to use their own labor or contractor for such services separately from EXPO, please read the following restrictions, requirements, and restraints. A non-official service contractor is any company, other than the designated official contractors, that an exhibitor wishes to use that requires access to the exhibit hall either before, during or after the Show. Use of a non-official contractor who requires any of the following services is not permitted: electrical, plumbing, telephone lines, drayage, rigging, booth cleaning, and catering. **NOTE: A valid and current copy of Exhibitor's contractor's Certificate of Insurance naming EXPO Convention Contractors, Inc., Printing Association of Florida, City of Miami Beach and Global Spectrum as "Additionally Insured" must accompany this document. If these documents are not provided, Exhibitor will not be allowed to use contractor's services in the area where unions claim jurisdiction.**

NOTE: Complete this form only if your company is using a Service Contractor other than EXPO Convention Contractors, Inc. to unpack, erect, assemble, dismantle or pack your display. **The local union claims jurisdiction over the erection, dismantling, repair and building of all exhibits.**

PLEASE COMPLETE:

\_\_\_\_\_ will indemnify and hold harmless EXPO Convention Contractors, Inc. from and against any bodily injury or property damage liability claims, judgments, damages, costs or expense, including reasonable attorney fees, arising out of or occasioned by the operations performed by \_\_\_\_\_ except for occurrences or accidents caused by the sole negligence of EXPO Convention Contractors, Inc., or for occurrences or accidents by any other party.

Exhibiting Company Name: \_\_\_\_\_ Booth # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Authorized on-site representative \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
(Please Print)  
\*\*\*\*\*

Name of Service Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

On-Site Supervisor \_\_\_\_\_

Return this form, along with Certificate of Insurance, and name and address of the employee/s who are working in your booth by **FEBRUARY 11, 2014** to EXPO, the Official Decorating Contractor:

EXPO CONVENTION CONTRACTORS, INC.  
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