

## Metro Detroit Chevy Dealers Health and Fitness Expo

## Cobo Center October 19 - 20, 2018



## **EXHIBITOR APPOINTED CONTRACTOR'S AGREEMENT**

If an exhibitor plans to use a company other than Convention & Show Services, Inc., for their carpenter labor the **EXHIBITOR ONLY** must complete and submit copies of this form to Show Management and Convention & Show Services, Inc. by **September 10, 2018**. Use of outside drayage contracting service, electrician or plumber is not permitted.

The exhibitor-appointed contractors are also required to provide Show Management and Convention & Show Services, Inc. notice in letter form by **September 10, 2018**. Exhibitor-appointed contractors must provide a General Liability Insurance Certificate of coverage in the amount of \$1,000,000.00 to include single limit of liability for each occurrence and subject to a deductible of \$250.00 per claim for Bodily Injury, and Broad Form Property Damage.

## THESE REQUIREMENTS WILL BE STRICTLY ENFORCED.

If the exhibitor and/or exhibitor appointed contractor fails to supply these forms by the date indicated above, the exhibitor-appointed contractor will not be permitted access to the exhibit floor to service the exhibit; and the work will be performed and/or supervised by Convention & Show Services, Inc.

It is the responsibility of the exhibitor to provide their appointed contractor with information pertinent to the installation and servicing of the exhibit, ie: utilities, service order forms, installation and dismantling dates, shipping instructions and labels, display regulations, etc. Exhibitor Service Manuals will be shipped to the exhibitor-appointed contractor only if requested in writing by the exhibitor.

| Exhibitor:                      | Booth Number: |      |
|---------------------------------|---------------|------|
| Exhibitor Contact:              | Telephone:    |      |
| Signature:                      | Date:         |      |
| Type of Work to be Performed:   |               |      |
| Exhibitor Appointed Contractor: |               |      |
| Address:                        |               |      |
| Email Address:                  |               |      |
| Phone Number:                   | Fax Number:   |      |
| City:                           | State:        | Zip: |
| Contractor Contact Name:        |               |      |
| Telephone:                      |               |      |

CSS will only accept this form if it is signed by the exposition contact (the Exhibitor)

PLEASE FORWARD A COPY TO YOUR APPOINTED CONTRACTOR AND KEEP ONE FOR YOUR RECORDS.