

Deadline: February 24, 2017

Exhibitor Appointed Contractor

An Exhibitor Appointed Contractor (EAC) is any company (other than one of the Official Show Contractors) that an exhibitor wants to use in the installation or dismantling of their booth. The following services are exclusive to the Architecture Expo 2017 and are those that cannot be performed by an Exhibitor Appointed Contractor:

Freight/Material Handling
Booth Cleaning
Security
Electric

Catering
Telephone/Internet
Plumbing
Rigging

Instructions

1. **Exhibitors** must complete and sign the attached EAC Designation form and submit by **February 24, 2017**. Use one form for each EAC you will use for the show.
2. Exhibitors, please inform your EAC they must complete the insurance and payment by **March 16, 2017**.
3. It is ultimately the responsibility of the exhibitor to make sure their EAC fulfills the requirements. EAC's failure to do so will prevent them from having access to the expo floor.

Requirements of the EAC

- No later than 30 days prior to the show, EACs must provide a certificate of insurance with at least the following limits:
 - Comprehensive General Liability not less than \$1,000,000 with respect to injuries to any one person in one occurrence; \$2,000,000 with respect to injuries to more than one person in any one occurrence; and \$500,000 with respect to damage of property;
 - Workers' Compensation Insurance, including employee liability coverage, in a minimum amount not less than \$1,000,000 of individual and/or aggregate coverage,
 - Naming Freeman, Architecture Expo 2017, Informa Exhibitions and Orange County Convention Center as additional insured.
- EACs agree to abide by all rules and regulations of the shows
- EACs will wear identification badges at all times. Temporary wristbands will be provided. Wristbands will be issued only to representatives of said contractor assigned to supervise, install, dismantle or maintain exhibits and exhibit-related equipment.

Rules and Regulations Governing EACs

- The EAC will refrain from placing an undue burden on the Official Contractors, specifically by not interfering in any way with the Official Contractors work.
- The EAC will not solicit business on the show floor at any time.
- The EAC will cooperate with the official contractors and with existing labor regulations or contracts as determined by the commitment made and obligations assumed by Show Management.
- Show Management will not provide access to the Exhibitor Service Manual until all fees and certificates of insurance have been received.

SHOW MANAGEMENT'S DISCRETIONARY RIGHTS

Exceptions to using the Official Contractors will be granted only if they do not interfere with or prejudice the orderly installation, interim services or dismantling of the exhibits. An exception will not be granted if it is inconsistent with commitments made and obligations assumed by Architecture Expo 2017 in any contract with service contractors, or in its lease with the OCCC.

Deadline: February 24, 2017

Definition: An Exhibitor Appointed Contractor (EAC) is any company, other than the designated official service contractors, that an exhibitor wishes to use that requires access to the exhibit hall either before, during or after the show. **EACs cannot provide the following exclusive services: Freight/Material Handling, Electrical, Plumbing, Telephone/Internet, Rigging, Booth Cleaning, Security and Catering.**

EXHIBITOR INFORMATION

Name of Exhibiting Company: _____

Booth Number: _____ Booth Dimensions: _____

I certify that I have authorized the exhibitor appointed contractor, named below, to install and dismantle my exhibit at the Architecture Expo 2017. Knowing that the contractor is my official representative, I further certify that the contractor will adhere to all show and facility regulations as if my own employee. The contractor will be informed that the appropriate fees (**\$200/EAC**) and a Certificate of Liability Insurance are required by **March 16, 2017. The \$200 fee is non-refundable.** I understand that my organization is ultimately responsible for the actions of the contractor while on this assignment.

Exhibitor Signature _____

E-mail address _____ Phone: _____

Printed name: _____ Date _____

EXHIBITOR APPOINTED CONTRACTOR INFORMATION

Company Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Fax: _____

E-mail address: _____

On-site Representative: _____

Cell Phone: _____

Exhibitor's Booth Number: _____

Please return completed Designation form no later than **February 24, 2017** to:
Email: tiffany.roe@informa.com

Deadline: March 16, 2017

Exhibitor Appointed Contractors must complete this form and submit to Architecture Expo Show Management. Payment and a Certificate of Insurance must be received by **March 16, 2017**. Review all EAC Rules & Regulations and insurance requirements.

EXHIBITOR APPOINTED CONTRACTOR INFORMATION

Company: _____

Contact Name/Title: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

We agree to abide by all rules and regulations governing EACs for the Architecture Expo 2017. (See next page).

Name of Contractor's On-Site Representative Phone Number

Signature of EAC Representative Date

Please list ALL exhibiting companies that your company will be working for (attach a list for more):

Company Name/Booth #	Company Name/Booth#
_____ / _____	_____ / _____
_____ / _____	_____ / _____
_____ / _____	_____ / _____
_____ / _____	_____ / _____
_____ / _____	_____ / _____

EAC fees: \$200 / Exhibiting Company (**The \$200 fee is non-refundable**)
Total # Exhibiting Companies: _____ Total Amount Due: \$ _____

**Send payment in full if by check to: AIA, PO Box 62671, Baltimore, MD 21264-2671
Email: tiffany.roe@informa.com**

****Please note credit card payment is NOT accepted via email. It must be faxed directly to the number on the credit card authorization form**

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**The American
Institute
of Architects**

**Architecture Expo
Credit Card Authorization Form**

Please complete the following information to make a payment to Architecture Expo via credit card. The EAC fee is \$200 per exhibiting company.

Exhibiting Company information

Exhibiting Company Name(s): _____ Booth #(s): _____

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Exhibiting Company Name(s): _____ Booth #(s): _____

Exhibiting Company Name(s): _____ Booth #(s): _____

Billing Information

Company name: _____

Cardholder name: _____

Billing address: _____

City: _____ State: _____ Zip code: _____

Invoice #: _____ Booth #: _____

Amount to charge: _____ **Date:** _____

Cardholder signature*: _____

**For security reasons digital signatures are not accepted.*

If you need any additional information please contact Tiffany Roe at 972.536.6337

Fax completed forms to the Accounting department at 972.550.5390.



This section will be shredded once the card has been approved.

Visa MasterCard American Express



Card #: _____ Expiration Date: _____