



designwest

center of the engineering universe

EXHIBITOR APPOINTED CONTRACTOR (EAC's) & THIRD PARTIES

NOTICE OF INTENT TO USE AN EXHIBITOR APPOINTED CONTRACTOR

If your company plans to use a contractor other than an official contractor, please complete this form and return it to the address below **by APRIL 1, 2013**. Failure to do so will result in the inability of the contractor to serve your exhibit. In addition, your selected contractor must furnish an original Certificate of Insurance showing General Liability Coverage and Worker's Compensation valid in San Jose, CA. The certificate must name the certificate must name UBM LLC (its employees and representatives), the San Jose McEnergy Convention Center (the "Venue") and Global Experience Specialists ("GES"), as additional insureds.

THESE REQUIREMENTS WILL BE STRICTLY ENFORCED.

Exhibiting Company_____	Booth Number_____	
Exhibitor Contact_____	Title_____	
Telephone Number _____	Fax Number_____	
Authorized Signature_____	Date_____	
Independent Contractor/Display House_____		
Type of Work to be Performed_____		
Contact Name_____		
Address_____	City_____	
State_____	Zip Code_____	Telephone Number_____
Emergency 24-hour Telephone Number_____		
Estimated Number of Workers _____	Estimated Date of Arrival_____	

Please Return To:

Sam Shen, Operations Manager
UBM
sam.shen@ubm.com

Certificate of Insurance must be forwarded to Sam Shen by April 1, 2013