



## EXHIBITOR APPOINTED CONTRACTOR (EAC's) & THIRD PARTIES

# EXHIBITOR APPOINTED CONTRACTOR INFORMATION

**The following information includes mandatory Rules & Regulations that pertain to the use of a Non-Official Service Contractor.**

Exhibitors must notify GDC Show Management of the intention to utilize an independent contractor by **February 9, 2018.**

Exhibitors must inform Non-Official Service Contractors that they must:

- ◆ Abide by all rules and regulations of the show. Found in the Rules & Regulations section of the online manual
- ◆ Hire Union personnel per the instructions under the Exhibit Set-up/Material Handling section of the manual.
- ◆ Not solicit business on the show floor.
- ◆ Wear their identification badge at all times.

All Non-Official Service contractors must secure, maintain and submit proof of the following insurance during set-up, show hours, and tear-down. It should be prepared by an insurance agent and include the following data, as per the sample included in this section.

- 1. PRODUCER:** Insurance Agent/Broker who issues the certificate
- 2. NAME OF INSURED:** Must be the legal name of the contracting party
- 3. TYPES OF INSURANCE:** Must include types required by contract
- 4. FORM OF COVERAGE:** Must be "occurrence" form of coverage
- 5. NAME ADDITIONAL INSUREDS:** Global Experience Specialists, Inc. (GES) (Official Service Provider), UBM LLC, a Delaware limited liability company (Show Management), Game Developers Conference 2018 (Show), and Moscone Center, ALL HALLS (Facility) as additional insureds on a primary and non-contributory basis.
- 6. CERTIFICATE HOLDER:** Must be listed as:  
Global Experience Specialists, Inc. (GES)  
Exhibitor Services  
7000 Lindell Road  
Las Vegas, NV 89118
- 7. POLICY EFFECTIVE DATE:** Must be prior to or coincidental with the first day of Exhibitor Move-In. (Saturday March 17, 2018)
- 8. POLICY EXPIRATION DATE:** Must be on or after the last day of Exhibitor Move-Out. (Saturday March 24, 2018)
- 9. LIMITS OF INSURANCE:** Must be the same or greater than required by contract.
  - Workers' Compensation Insurance in full compliance with all laws covering the contractor's employees, in accordance with the applicable laws in the state for which this event is being held or for where the work is being performed or of the state in which vendor is obligated to pay compensation to employees engaged in the performance of the work. (\$1,000,000 Each Accident, \$1,000,000 Disease- EA Employee, \$1,000,000 Disease – Policy Limit)
  - Employer's Liability Insurance, covering injury or death of any employee, which may be outside the scope of Worker's Compensation Insurance.
  - Comprehensive General Liability and Property Damage Liability Insurance including Bodily Injury and Property Damage limits not less than one million dollars (\$1,000,000) per occurrence and \$2,000,000 general aggregate and \$2,000,000 products & completed operations aggregate.



- Automobile Liability on Any Auto, Hired Autos and Non-Owned Autos with limits no less than \$1,000,000.
- Fire Damage Insurance, limits not less than fifty thousand dollars (\$50,000).
- Medical Expenses for any one person with no less than five thousand dollars (\$5,000)
- Umbrella Liability Insurance not less than one million dollars (\$1,000,000) per occurrence, one million dollars (\$1,000,000) each aggregate.

**10. AUTHORIZED REPRESENTATIVE:** Must be signed (not stamped) by an authorized representative of Producer.

**There is a “Sample” Certificate of Insurance located in this section of the Exhibitor Service Manual**

The certificate must be submitted online by **February 26, 2018** via the following link:

**<https://www.certfocus.com/expresso>**

**\*MONEY SAVING TIP** – Please note that when ordering EAC’s for booth labor, you will pay for labor beginning when they arrive on show site, regardless of whether your freight has been delivered or when they begin actually working. If you order labor from GES, labor charges begin when the freight has been delivered to your booth and work actually begins. Event Management cannot settle any labor disputes between exhibitors and their contracted EAC’s.



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**10. AUTHORIZED REPRESENTATIVE:** Must be signed (not stamped) by an authorized representative of Producer.

**There is a “Sample” Certificate of Insurance located in this section of the Exhibitor Service Manual**

The certificate must be submitted via email by **February 26, 2018:**

**[GES@CertFocus.com](mailto:GES@CertFocus.com)**

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**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 the official contractor (GES), please complete this form, submit the EAC/Third Party's WC Mod # on insurance company stationery and return both documents to the address below by **February 9, 2018** for review and approval by GDC Show Management. **Failure to do so will result in the inability of the contractor to service your exhibit.**

In addition, your selected contractor must furnish an original Certificate of Insurance showing General Liability Coverage and Worker's Compensation with the required limits, valid in California. The certificate must name Global Experience Specialists, Inc (GES) (Official Service Provider), UBM LLC (Show Management), Game Developers Conference 2018 (Show), and Moscone Center, ALL HALLS (Facility) as additional insureds.

All EAC's must hire Union personnel per the instructions under the Exhibit Set-up/Material Handling section of the manual.

**THESE REQUIREMENTS WILL BE STRICTLY ENFORCED.**

Exhibiting Company \_\_\_\_\_ Booth Number \_\_\_\_\_

Exhibitor Contact \_\_\_\_\_ Title \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Independent Contractor/Display House \_\_\_\_\_

**Current to 2018 Workman's Compensation Experience Mod Rate (WC Mod #)** \_\_\_\_\_

Type of Work to be Performed \_\_\_\_\_

Is this Company JUST Supervising? YES  NO

Contact Name \_\_\_\_\_

Contact Email Address (REQUIRED) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

Emergency 24-hour Telephone Number \_\_\_\_\_

Estimated Number of Workers \_\_\_\_\_ Estimated Date of Arrival \_\_\_\_\_

**Please Return To:**

Meredith Omori, Operations Manager, UBM  
[meredith.omori@ubm.com](mailto:meredith.omori@ubm.com) **DUE: February 9, 2018**