



Kentucky Exposition Center

ELECTRICAL SERVICE ORDER FORM

Control No. _____
Return to:
Service Desk - KEC
P.O. Box 37130
Louisville, KY 40233-7130
(502) 367-5321
FAX (502) 367-5358

Name of Event

Date(s) of Event

! ONLINE ORDERING NOW AVAILABLE AT WWW.KYEXPO.ORG !

PLEASE FILL OUT ORDER FORM BELOW AND ACCOMPANYING PAYMENT FORM:
ADVANCE ORDERS must be postmarked no later than twenty-one (21) days prior to the first day of the event.
Any orders postmarked after that day will be at the floor order rate.
PAYMENT MUST ACCOMPANY ORDER TO RECEIVE ADVANCE ORDER RATE. **NO EXCEPTIONS.**

STANDARD ELECTRICAL SERVICE
208/120 Volt AC Single Phase or Three Phase
480/277 Volt AC Single Phase or Three Phase
480 Volt AC Single Phase or Three Phase

CONDITIONS & REGULATIONS

1. Wall, column and permanent building utility outlets are not a part of booth space and are not to be used by exhibitors unless specified otherwise.
2. All equipment regardless of source of power must comply with all national, state and local safety codes.
3. Claims will not be considered unless filed by exhibitor prior to close of show.
4. Prices based on current wage rates and are subject to change without notice.
5. Special equipment requiring company engineers or technicians for assembly, servicing, preparatory work and operation may be executed without "house electrician". However, all service connections and overload protection to such equipment must be made by "house electrician".
6. All equipment must be properly tagged and wired with complete information as to type of current, voltage, phase, cycle, horsepower, etc.
7. All material and equipment furnished by K.E.C. for this service order shall remain K.E.C.'s property and shall be removed ONLY by K.E.C. at the close of the show.
8. Unless otherwise directed, K.E.C. electricians are authorized to cut floor coverings to permit installation of service.
9. All exhibitor's cords must be the 12/3 wire grounded type. All exposed non-current carrying metal parts of fixed equipment, which are liable to be energized, shall be grounded.
10. Rates quoted for all connections cover only the bringing of service to the booth in the most convenient manner and do not include connection equipment or special wiring.
11. Advance orders must be postmarked a minimum of twenty-one (21) days prior to first show day.
12. All fountains and pumps should have Ground Fault Interruption (G.F.I.) protection.

Qty	Description	Advance Rate	Floor Rate	Cost
120 Volts Service				
	20 Amp	\$100	\$180	
	20 Amp GFI	\$120	\$210	
	30 Amp	\$130	\$220	
208 Volts Single Phase				
	30 Amp	\$240	\$465	
	60 Amp	\$335	\$690	
	100 Amp	\$480	\$875	
208 Volts Three Phase				
	30 Amp	\$290	\$550	
	60 Amp	\$425	\$755	
	100 Amp	\$535	\$975	
	200 Amp	\$1,010	\$1,835	
480 Volts Single Phase				
	30 Amp	\$240	\$405	
	60 Amp	\$335	\$690	
	100 Amp	\$480	\$875	
480 Three Phase				
	30 Amp	\$300	\$580	
	60 Amp	\$445	\$730	
	100 Amp	\$575	\$1,055	

Electrician Hours _____

*LABOR & ELECTRIC SUBTOTAL _____

Electrician Regular/Advance \$70 per hour
Floor/Overtime \$115 per hour

ONE HOUR MINIMUM

Regular time is Monday through Friday, 7:30 a.m. - 4:00 p.m. Time and 1/2 is all other hours including weekends. Holidays are double time.

Firm Name _____
Booth Number _____
Address _____

City Telephone _____
State Zip _____
Authorized By: _____
Signature Date _____

Exhibitors shall pay for any required or requested services, equipment, materials and technicians at prevailing rates and conditions at the time of the event.

Make remittance payable to: Kentucky Exposition Center
P.O. Box 37130
Louisville, KY 40233-7130
Check # _____

EXTENSION CORD RENTAL \$25.00 Advance _____
\$40.00 Floor _____
6% KY Sales Tax _____
(for cord rental only)
Subtotal Extension Cord Rental _____
*Subtotal Labor & Electric _____
Total Electrical Service Order Form _____

METHOD OF PAYMENT FORM



NAME OF SHOW: _____
COMPANY NAME _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____
FAX: _____

ATTN: Service Desk

P O BOX 37130 Louisville, KY 40233

PH: (502) 367-5321 FAX: (502) 367-5358

If you are going to utilize the services of Kentucky Exposition Center, this form must be completed and returned. Please indicate, below, the method of payment you will be using for services provided.

CASH
 CHECK

To the address above in U.S. funds
****A service fee of \$25.00 will be charged on checks that are returned for any reason.****

BANK TRANSFER

Kentucky State Fair Board
Fifth Third Bank
Fountain Square
Cincinnati, OH 45263
ACCT: 82194565
Receipts account
ABA# 083 002342
Wire info: 042 000314
Swift# FTBC US 3C

CREDIT CARD

VISA AMERICAN EXPRESS
 MASTERCARD DISCOVER

This authorization will allow us to charge your account for your advanced orders and any additional amounts incurred as a result of show site orders placed by representative. **(THIS INCLUDE INTERNAL FREIGHT HANDLING CHARGES.)**

****A service fee of \$25.00 will be charged for any credit card purchase that is reversed or chargedback.****

Account no: _____
Verification Number _____
(3 digit number on back of card)
Expiration Date: _____
Cardholder's name: _____
Signature: _____
Email: _____

THIRD PARTY AUTHORIZATION

We agree, as Exhibit Contractor for the client, that we are responsible for payment of charges. All items indicated below will be the sole responsibility of the Exhibit Contractor.

All invoices are Net 30 Days

- All Services
- Electric
- Labor
- Water/Air Connections
- Forklift/JLG Highlift rentals
- Carpet Cleaning
- Freight Handling

THIRD PARTY AGENT:

Account no: _____
Verification Number _____
(3 digit number on back of card)
Expiration Date: _____
Cardholder's name: _____
Signature: _____
Company Name: _____
Address: _____
City/State/Zip: _____
Phone: _____
Fax: _____
Email: _____

I AGREE TO ALL TERMS AND CONDITIONS AS DESCRIBED IN THIS METHOD OF PAYMENT FORM

PLEASE RETURN FORM & PAYMENTS TO THE ADDRESS ABOVE.

ORDER DEADLINE DATE:
21 DAYS PRIOR TO
SHOW DATE

UPDATED 1/6/09