



1610 COLISEUM DRIVE • HAMPTON, VA • 23666 • PHONE (757) 315-1633 email: [dnilen@thehrcc.com](mailto:dnilen@thehrcc.com)

**FULL PAYMENT MUST BE RECEIVED 14 DAYS PRIOR TO EVENT TO GUARANTEE REQUEST AND TO RECEIVE THE ADVANCE RATE**

Event Name: \_\_\_\_\_ Booth #: \_\_\_\_\_

Event Dates: \_\_\_\_\_ Exhibiting Company: \_\_\_\_\_

Your Contact Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

UTILITIES	24 HR POWER	ADVANCE ORDER	FLOOR ORDER	QTY	AMOUNT
<b>Electrical</b>					
*Service above 50 Amps requires custom installation by an Electrician to be billed at the hourly rate, with a one (1) hour minimum required. For <b>24 Hour Power</b> Needs: Check box, and add 50% to that service.					
2000 watt Receptacle, 110 Volt, 18 Amps		\$ 60.00	\$ 80.00		
1 Phase, 208 Volt, 30 Amps		\$ 175.00	\$ 225.00		
1 Phase, 208 Volt, 60 Amps*		\$ 250.00	\$ 300.00		
1 Phase, 208 Volt, 100 Amps*		\$ 350.00	\$ 400.00		
1 Phase, 208 Volt, 200 Amps*		\$ 600.00	\$ 750.00		
3 Phase, 208 Volt, 30 Amps		\$ 300.00	\$ 350.00		
3 Phase, 208 Volt, 60 Amps*		\$ 375.00	\$ 450.00		
3 Phase, 208 Volt, 100 Amps*		\$ 425.00	\$ 500.00		
3 Phase, 208 Volt, 200 Amps*		\$ 575.00	\$ 625.00		
3 Phase, 480 volt, 30 Amps		Call for Pricing			
3 Phase, 480 volt, 60 Amps*					
3 Phase, 480 volt, 100 Amps*					
3 Phase, 480 volt, 200 Amps*					
<b>Water</b>					
Water/Drain per 100 gal.		\$175.00			
Water/Drain per 1000 gal.		Call for Pricing			
<b>Equipment Rental **</b>					
Extension Cord		\$ 20.00	\$ 20.00		
Multi-receptacle Power Strip		\$ 20.00	\$ 20.00		
<b>Labor*</b>					
Electrician/per hour		\$ 45.00	\$ 65.00		
Electrician-Holiday/per hour		\$ 67.50	\$ 97.50		
Electrician-Overtime/per hour		\$ 90.00	\$ 110.00		
<b>Total Utility Order</b>					\$
<b>**Add 6% Tax to all Equipment Orders (Just Items in the "Equipment Rental" section)</b>					\$
<b>Total Utilities+Tax</b>					\$

**IMPORTANT CONDITIONS AND REGULATIONS**

**Code Safety and Compliance**

1.All equipment provided by clients and exhibitors must comply with all state, local and international safety codes.

**Schedule**

1.To qualify for advance order rates, all orders must be received by the Hampton Roads Convention Center at least 14 days in advance. Call 757-315-1618 if you have any questions about your order, or to confirm receipt.

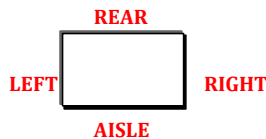
2.Services ordered within 48 hours of event commencement may not be available. PLEASE ORDER IN ADVANCE TO ENSURE SERVICE AVAILABILITY.

**Limitation of Liability**

The parties agree that implied warranties of merchantability and fitness for a particular purpose and all other warranties, expressed or implied, are excluded from this agreement. The HRCC does not assume liability for damages of any type whatsoever or for the loss of anticipatory profits resulting from the installation, use, or interruption of the services or for damage of any sort whatsoever to user's goods or equipment arising from the installation, use or interruption of the services or any other cause whatsoever. The HRCC shall not be held responsible for late installation or interruption of any services that may occur.

**Utilities Notes:**

- 1.Only one outlet will be provided for each power line ordered.
- 2.Power cannot be shared between booths.
- 3.Power is located in the most convenient location unless noted on form.
- 4.No refunds for services requested and already installed.
- 5.Connection to equipment is the exhibitors' responsibility.
- 6.Locate desired location for power on diagram to the right.



**METHOD OF PAYMENT**

CASH or  CHECK Made payable to: Hampton Roads Convention Center • Our Tax ID # is 54-6001336

AMERICAN EXPRESS  DISCOVER  MASTERCARD  VISA

Credit Card Holder Name: \_\_\_\_\_ E-mail address for receipt: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Card Security Code: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

**I authorize the charges detailed within this form to be charged to my credit card listed here. By signing, I also agree that I have read and agree to the terms and conditions set forth for these services by HRCC.**

Credit Card Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TOTAL PAYMENT MUST ACCOMPANY THIS FORM. Please mail to address above, or scan & email to [dnilen@thehrcc.com](mailto:dnilen@thehrcc.com)**