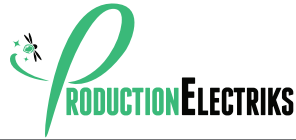


Office 407-251-0413  
Fax 407-251-8931



Need Form Assistance:  
info@productionelektriks.com

Show Name \_\_\_\_\_ Company Name \_\_\_\_\_ Booth Number \_\_\_\_\_

**Booth Type:** (Please Circle One)    **Inline**    **Peninsula**    **Island**

**Type Of Required Service:** (Please Circle One per grid)    **Water**    **Electrical**    **Compressed Air**

**Suggested Marking Method**

**For Electrical:** 1 = 1 to 500 watts,    2 = 501 to 1000,    3 = 1001 to 1500,    4 = 1501 to 2000 watts etc.

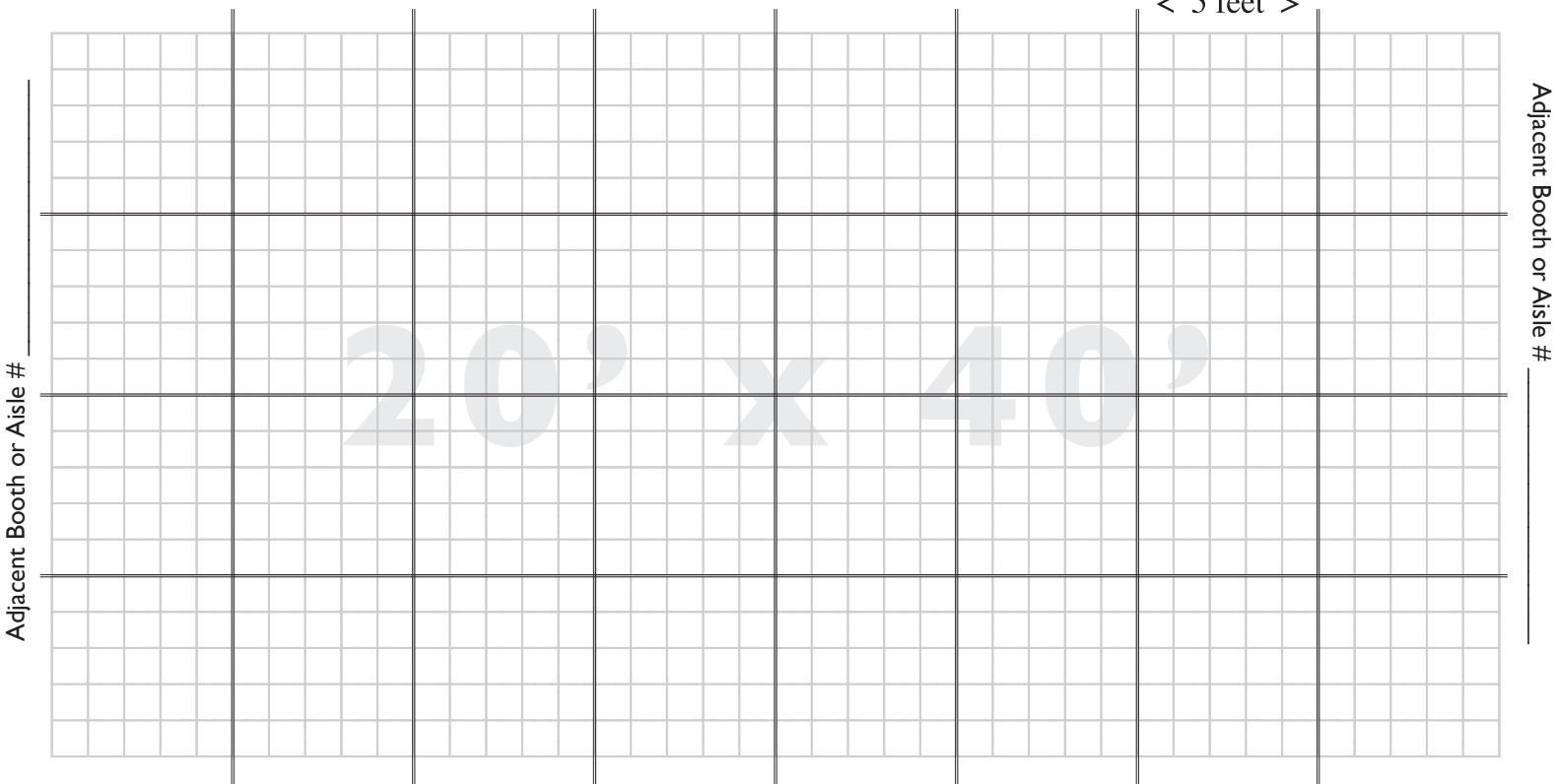
**For All Service Types:** 0 = Distribution Box Location

**For Water and Air orders:** Please number by location & provide requirements of services on your Water and Air order form.

**SCALE:** 1 Square equals 1 Foot

Adjacent Booth or Aisle # \_\_\_\_\_

< 5 feet >



Adjacent Booth or Aisle # \_\_\_\_\_

Adjacent Booth or Aisle # \_\_\_\_\_

Adjacent Booth or Aisle # \_\_\_\_\_

**Helpful Hints**

- \* If you have Compressed Air or Water requirements, submit separate completed floor plans for each type of service.
- \*\* Keep in mind that a Distribution box for required services may have to be concealed within booth space.
- \*\*\* Remember to Order Labor for all under carpet or overhead services distribution.
- \*\*\*\* **Please Remember to Completely fill out Booth Orientation.**