

onnecticut Convention Center

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Forms available online at www.ctconventions.com

COMPRESSED AIR SERVICE ORDER FORM

CA

ORDER TOTAL:

Name of Event:		Dat	Date of Event:			
Firm Name:		Вос	Booth Number:			
Street Address:		On-	Site Machini	st Name:		
City, State, Zip:		On-	On-Site Machinist Phone Number:			
E-mail Address:						
Compressed Air will be set-up prior to move-in, please indicate a specific Date & Time of when machines will be in place, set-up and ready for an Engineer to tie-in. (Note: tie-ins are scheduled on a first-come first-serve basis): Date:/						
All Air Compression orders MUST be received 7 days prior to the FİRST scheduled move-in day. No exceptions.						
Money Order #: Check #:						
☐ MasterCard ☐ Discover Card ☐ Visa ☐ American Express Name on card:						
Billing Address (if different from above):						
Billing City:	State:			Zin (Zip Code:	
Credit Card #:						
Expiration Date:	Security Code:					
Authorized Signature:						
Compressed Air Rules & Regulations:						
• The CTCC does not supply air regulator & male and female fittings. Exhibitors MUST bring their						
own.						
• A Floor Plan MUST be submitted with an Air Compression Order.						
• All Air Compression Service requires a minimum charge of 1 hour labor at \$65 per hour per connection.						
Additional Labor Rates may apply.						
 All orders are charged *per air line*. 						
Please fill out information below based on air compression requirements.						
Size of Fitting: (Standard) □ 1/4" □ 3/8" □ 1/2" □ 3/4"						
Size of Hose: (Standard) \Box 1/4" \Box 3/8" \Box 1/2" \Box 3/4"						
PSI: CFM:						
STANDARD	Rate	# of Air Lines	Labor	CT 6.35% Tax	Total	
First Drop Air Compression	\$325.00					
Additional Drops	\$100.00					