

SPECIAL FORKLIFT SERVICE ORDER FORM

GROCERY INNOVATIONS CANADA 2023

Toronto Congress Centre - North Building October 24 - 25, 2023

THIS FORM IS NOT FOR MATERIAL HANDLING, PLEASE COMPLETE THIS FOR IF YOU REQUIRE A FORKLIFT FOR BOOTH WORK,
I.E. LIFTING SIGNAGE OR SPOTTING EQUIPMENT - ALL FORKLIFTS ARE TRIPLE STAGE MASTS ONLY.

1: EXHIBITOR MUST REPORT TO SERVICE DESK TO PICK UP FORKLIFT AND OPERATOR. 2. STARTING TIMES CAN ONLY BE GUARANTEED FOR 8:00 AM AND 12:30 PM.									
FORKLIFT REQUIREMENTS									
EXHIBITING COMPANY:					PHONE:			воотн #(s):	
CONTACT NAME:									
CONTACT NAME: EMAIL ADDRESS:									
MOVE-IN:		DATE SERVICE REQUIRED:			TIME SERVICE REQUIRED:			APPROX. HRS. NEEDED:	
					AM PM TIME SERVICE REQUIRED:				
MOVE-OUT:		DATE SERVICE	REQUIRED:			REQUIRED: AM	PM	APPROX. HRS	S. NEEDED:
OTV SERVICE		ORDERS REC. PRIC			ORDERS REC. A		TER:	TOTAL	
QTY SERVICE		September 29,		2023		otember 29, 2023		IOIAL	
			REG TIME \$185.00/HR	OVER TIME \$278.00/HR		REG TIME \$222.00/HR	OVER TIME \$325.00/HR		
			8AM-4PM	4PM-8AM		8AM-4PM	4PM-8AM		
			MON-FRI	MON-FRI		MON-FRI	MON-FRI		
				INCLUDED			INCLUDED		
			INCLUDED				INCLUDED		
ALL ORDERS ARE SUBJECT TO A ONE-HOUR MINIMUM FOR							SUB-	ΓΟΤΑL	
MOVE-IN AND A ONE-HOUR MINIMUM FOR MOVE-OUT.						13%	нѕт		
NO ORDERS WILL BE PROCESSED UNTIL PAYMENT IN FULL HAS BEEN RECEIVED					HST #R12	24 192 220 TOT		TAL	
1. Orders must be prepaid in full including tax. Purchase Orders do not qualify as payments. Orders must be cancelled 7 working days prior to first move-in day to be considered for refund. 2. All discrepancies must be settled on site prior to show move-out. 3. Any claims for services not provided will not be considered after the show closes.									
PAYMENT OPTIONS									
☐ CHEQUE PAYABLE TO LANGE TRANSPORTATION AND STORAGE LTD. 500 CARLINGVIEW DR, ETOBICOKE, ON, M9W 5R3									
□ EFT DETAILS PROVIDED UPON REQUEST									
□ INTERAC ETRANSFER PAYABLE TO JOER@LANGESHOW.COM									
□ VISA* □ MASTERCARD* *SUBJECT TO 2.4% CREDIT CARD SURCHARGE TO BE APPLIED AT TIME OF PROCESSING									
CREDIT CARE) NO:				EXPIRY DATE: MM/YY/			_	CVV:
AUTHORIZED SIGNATURE:					PRINT NAME:				
BILLING NAME AND ADDRESS OUR INVOICE/RECEIPT WILL BE SENT ELECTRONICALLY PLEASE PROVIDE US WITH THE APPROPRIATE EMAIL ADDRESS:									
COMPANY:							PO#:		
ADDRESS:					CITY:				
PROV/STATE: POSTAL/ZIP CODE:					PHONE #:				
ALL CUSTOMERS WITHOUT AN ESTABLISHED ACCOUNT WITH LANGE MUST PREPAY									
EXHIBITORS AND THEIR REPRESENTATIVES HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS LANGE TRANSPORTATION AND STORAGE LTD., THE EMPLOYEES THEREOF AND THEIR REPRESENTATIVES AND AGENTS, AGAINST ANY AND ALL CLAIMS FOR LOSS, DAMAGE, THEFT OR INJURY. INDEMNIFICATION INCLUDES THE PERIOD OF STORAGE PRIOR TO AND IMMEDIATELY FOLLOWING THE EVENT. THE EXHIBITOR, ON SIGNING THE CONTRACT, RELEASES THE FOREGOING FROM ANY AND ALL CLAIMS FOR LOSS, THEFT, DAMAGE OR INJURY HOWEVER CAUSED. EXHIBITORS MUST PROVIDE THEIR OWN INSURANCE AND SECURITY.									
AUTHORIZED SIGNATURE:				PRINT:				TITLE:	