Installation of Compressed Gas Cylinders

LaserOpticsBerlin
19 - 21 March 2012

E1

Hall:	Stand No.:
Exhibitor:	

Order Form 2012

Deadline: 2 weeks prior to the event

Messe Berlin, ST21: **Fax: +49(0)30/3038-2898**
Mailing address: Messe Berlin GmbH, Service + Technik, Messedamm 22, 14055 Berlin, Germany
Technical queries: **Phone:** +49(0)30/3038-2824**, E-Mail:** messetechnik@messe-berlin.de

For approval of installation of compressed gas cylinders please fill in the below listed questionnaire:

Period of usage: .....

Type of compressed gas used: .....

Type of usage: .....

.....

Location of cylinders on stand: .....

Daily requirements: Number of cylinders: ..... qty.

Contents of cylinders: ..... kg resp. litre

Will the compressed gas be supplied via piping? |__| yes |__|no over a distance of ..... m in ..... pipes

Are stop valves installed? automatic/manual |__| yes |__|no

Are stop valves marked? |__| yes |__|no

Are fire extinguishers available? automatic extinguishers |__| yes |__|no

portable extinguishers |__| yes |__|no ..... nos. with powder filling/with CO_2 filling

Proof of last pressure test .....

The pertinent instructions for the use of the compressed gas cylinder units are available at the location of the exhibition.

Messe Berlin will schedule the official dates for inspection and will inform the exhibitor accordingly (please see C1 Technical Guidelines, item 5.7).

By signing the order you acknowledge the stipulated conditions.

Name and address of recipient of invoice: VAT Reg. No.

Contact for queries: Phone: Telefax :

E-Mail:

Date:	Name of the customer (in block letters):	Legally binding signature and company stamp:
.....	.....	.....

As of: July 2011 / Subject to alteration / Legal venue and place of jurisdiction is Berlin-Charlottenburg